Diversity Monitoring Form



To ensure that our recruitment process adheres to our Equal Opportunities Policy, all applicants are requested to complete this form. Any information you provide will be treated as strictly confidential and will not be used as part of the short-listing process. Information will be stored in accordance with our Privacy Policy, Data Retention Policy and the General Data Protection Regulations.

Please return the completed form along with your application form to the Operations Manager via email: hr@vwt.org.uk

Gender Male \Box Female \Box Intersex \Box Non-binary \Box Prefer not to say \Box
If you prefer to use your own gender identity, please describer here:
Is the gender you identify with the same as your gender registered at birth? Yes □ No □ Prefer not to say □
Age 16-24 □ 25-29 □ 30-34 □ 35-39 □ 40-44 □ 45-49 □ 50-54 □ 55-59 □ 60-64 □ 65+ □ Prefer not to say □
What is your ethnicity?
Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box.
Asian or Asian British Indian □ Pakistani □ Bangladeshi □ Chinese □ Prefer not to say □ Any other Asian background, please give details:
<i>Black, African, Caribbean or Black British</i> African Caribbean Prefer not to say Any other Black, African or Caribbean background, please give details:
Mixed or Multiple ethnic groupsWhite and Black CaribbeanImage: White and Black AfricanImage: White and AsianPrefer not to sayImage: Any other Mixed or Multiple ethnic background, please give details:
White English Welsh Scottish Northern Irish Irish British Gypsy or Irish Prefer not to say Irish Any other White background, please give details:
Other ethnic groupArabPrefer not to sayAny other ethnic group, please describe:

Do you consider yourself to have a disability or health condition?

Yes 🗌 No 🗌 Prefer not to say 🗌

What is the effect or impact of your disability or health condition on your work? Please describe here:

The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment', then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

What is your sexual orientation?
Heterosexual 🗆 🛛 Gay 🗆 Lesbian 🗆 Bisexual 🗆 Asexual 🗆 Pansexual 🗆
Undecided \Box Prefer not to say \Box
If you prefer to use your own identity, please describe here:
What is your religion or belief?
No religion or belief 🔲 Buddhist 🗌 Christian 🗌 Hindu 🗌 Jewish 🗌
Muslim \Box Sikh \Box Prefer not to say \Box If other religion or belief, please describe:
What is your working pattern?
Full-time 🗌 Part-time 🗌 Prefer not to say 🗌
What is your flexible working arrangement, if any?
None 🗌 Flexi-time 🗌 Staggered hours 🗌 Term-time hours 🗌
Annualised hours 🗌 Job-share 🔲 Flexible shifts 🔲 Compressed hours 🗌
Homeworking \Box Prefer not to say \Box If other, please give details:
Do you have caring responsibilities? If yes, please tick all that apply
None
Primary carer of a child/children (under 18) \Box
Primary carer of disabled child/children \Box
Primary carer of disabled adult (18 and over) \Box
Primary carer of older person \Box

Thank you for taking the time to complete this survey

Secondary carer (another person carries out the main caring role) \Box

Prefer not to say \Box