

PRIVATE AND CONFIDENTIAL

Equal Opportunities Monitoring Form

Squash Liverpool CIC is striving to be an Equal Opportunities employer and believes in Equal Opportunities for all our staff, volunteers and participants. We also have a requirement to collect this information for our funders and partners.

The aim of our policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of gender, class, race, nationality, ethnic origin, marital status, trans-gender status, sexual orientation, age, physical disability or religious belief.

Selection criteria and procedures will be kept under review to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities.

All employees are required to comply with, and actively promote this policy.

In order to monitor our equal opportunities policy, it would be very helpful to us if you could complete this form. The information will be treated in the strictest confidence and will not influence the selection procedure.

All information will remain **confidential** and if you prefer not to answer any of the questions, please leave it blank.

1. What age group do you belong to?
0 - 19 20 - 34 35 - 49 50 - 64 65 and over
2. How would you describe your ethnic origin?
Arab: Middle Eastern Arab - North African Other Middle Eastern background Middle Eastern and North Africa
Asian or Asian British: Indian Pakistani Bangladeshi Chinese Other Asian Background
Black or Black British: African Caribbean Other Black Background
Mixed or Dual Heritage: White & Black Caribbean White & Black African White & Asian
Other Mixed Background
White: British Irish Northern Irish Cypsy / Irish Traveller Welsh
Other White Background
Other Ethnic Group (please specify)
Prefer to self-describe as
Prefer not to say



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Equal Opportunities Monitoring Form (continued)

3. How would you describe your gender? Male (inc trans Male) Female (inc trans female) Non Binary
Prefer to self-describe as
Prefer not to say
4. Do you identify as transgender? Yes No Prefer not to say
5. Do you consider that you have a disability? Yes No Prefer not to say
6. How would you describe your sexuality?
Bisexual Gay man Heterosexual (Straight) Gay woman / Lesbian Queer (other than the above)
Prefer to self-describe as
Prefer not to say
7. What is your religion or belief? No religion or belief Buddhist Christian Hindu Jewish Muslim Rastafarian Sikh
Prefer not to say
Other religion or belief, please write in:
Other religion or belief, please write in: 8. Do you have caring responsibilities? If yes, please tick all that apply Primary carer of a child/children (under I8) Primary carer of disabled child/children Primary carer of disabled adult (I8 and over) Primary carer of older person Secondary carer (another person carries out the main caring role)