



## **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**



**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:

**8. Do you have caring responsibilities? If yes, please tick all that apply**

Primary carer of a child/children (under 18)  Primary carer of disabled child/children

Primary carer of disabled adult (18 and over)  Primary carer of older person

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

Prefer not to say

Please complete this form and send in with you application form to:

**becky@squashliverpool.co.uk**