



Equality and Diversity Monitoring Form

Cornwall FA wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010 and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this but filling in this form is voluntary.

Please be assured that any information disclosed on this form will not be shared with the recruitment panel for the role you are applying for and will be used only by the equality and diversity lead to store and process anonymised diversity data for the purpose of ensuring equality of opportunity.

Sex: Male Female I identify in another way/prefer to self-describe Prefer not to say
If you prefer to use your own term, please specify here _____

Are you married or in a civil partnership? Neither Prefer not to say

Age 18-24 25-34 35-44 45-54 55-64 65-74 75+ Prefer not to say

SEXUAL ORIENTATION

Are you?

Bi (Bisexual) Gay /Lesbian Heterosexual /Straight

I identify in another way / prefer to self-describe Prefer not to say

If you prefer to use your own term, please specify here _____

TRANS STATUS

Do you identify as Trans?

Yes No Prefer not to say

What is your ethnic group?

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

White

English, Welsh, Scottish, Northern Irish or British

Irish Roma Gypsy or Irish Traveller

Any other white background, please write in: _____

Mixed or Multiple ethnic groups

White and Black Caribbean White and Black African White and Asian

Any other Mixed or Multiple background, please write in: _____

Asian or Asian British

Indian Pakistani Bangladeshi Chinese

Any other Asian background, please write in: _____

Black, Black British, Caribbean or African

Caribbean African Any other Black, Black British or Caribbean background, please write in: _____

Other ethnic group

Arab Any other ethnic group, please write in: _____

Prefer not to say

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 ability to give your best at work?
Please write in 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 religion or belief?

No religion or belief Buddhist Christian Hindu Jewish

Muslim Sikh Prefer not to say If other religion or belief, please write in: _____

PREGNANCY / MATERNITY

Are you currently pregnant or taking parental leave?

Yes No Prefer not to say

Please complete and return to dawn.aberdeen@cornwallfa.com