**Logo

Description automatically generatedHUNTINGDONSHIRE FOOTBALL ASSOCIATION**Ambury House, Sovereign Court, Lancaster Way, Huntingdon, PE29 6XU

**EQUALITY MONITORING FORM**

**Please select relevant responses.**Completion of this form is anonymous and optional

**1. Are you**

Female

Male

I identify in another way / prefer to self-describe [please specify]

Prefer not to say

**2. Age**

18 – 24

25 – 34

35 – 44

45 – 54

55 – 64

65 – 74

75+

Prefer not to say

**3. Sexual Orientation**

Bisexual

Gay man

Gay woman / lesbian

Heterosexual

I identify in another way / prefer to self-describe [please specify]

Prefer not to say

**4. Do you identify as transgender?**

Yes

No

Prefer not to say

**5. Disability**

Equality Act 2010 definition of disability

Under the Equality Act 2010, a person is considered to have a disability 'if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities’. ‘Substantial' is defined by the Act as 'more than minor or trivial'. An impairment is considered to have a long-term effect if:

* it has lasted for at least 12 months
* it is likely to last for at least 12 months, or
* it is likely to last for the rest of the person’s life.

Do you have a disability?

Yes

No

Prefer not to say

*If the answer is yes, please specify below;*

Hearing impairment

Visual impairment

Physical impairment - ambulant

Physical impairment - wheelchair user

Learning impairment/disability

Learning difficulty

Social/communication impairment

Long term illness

Mental health condition

Other

Prefer not to say

**6. Ethnic group**

**A. White**

Welsh/English/Scottish/Northern Irish/British

Irish

Gypsy, Roma or Irish Traveller

Eastern European

Other, please specify:

**B. Mixed/multiple ethnic groups**

White and Black Caribbean

White and Black African

White and Asian

Other, please specify:

**C. Asian/Asian British**

Indian

Pakistani

Bangladeshi

Chinese

Other, please specify:

**D. Black/African/Caribbean/Black British**

African

Caribbean

Other, please specify:

**E. Other**

Arab

Other, please specify:

**F.  Prefer not to say**

**7. Religion or belief**

Christian (all denominations)

Buddhist

Hindu

Jewish

Muslim

Sikh

Other, please specify:

No religion

Prefer not to say

**8. Marriage/ Civil Partnership**

Married or in a civil partnership

Neither

Prefer not to say

**9. Are you currently pregnant or taking parental leave?**

Yes

No

Prefer not to say

Position applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email all completed forms to [Info@huntsfa.com](mailto:Info@huntsfa.com)