



## Equality and Diversity Monitoring Form

**Kent 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 to store and process anonymised diversity data for the purpose of ensuring equality of opportunity.

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**Gender** Man ☐ Woman ☐ Intersex ☐ Non-binary ☐ Prefer not to say ☐ If you prefer to use your own term, please specify here .....

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**Are you married or in a civil partnership?** Yes ☐ No ☐ Prefer not to say ☐

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**Age** 16-24 ☐ 25-29 ☐ 30-34 ☐ 35-39 ☐ 40-44 ☐ 45-49 ☐  
50-54 ☐ 55-59 ☐ 60-64 ☐ 65+ ☐ Prefer not to say ☐

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### 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

#### White

English ☐ Welsh ☐ Scottish ☐ Northern Irish ☐ Irish ☐  
British ☐ Gypsy or Irish Traveller ☐ Prefer not to say ☐

Any other white background, please write in:

#### Mixed/multiple ethnic groups

White and Black Caribbean ☐ White and Black African ☐ White and Asian ☐ Prefer not to say ☐  
Any other mixed background, please write in:

#### Asian/Asian British

Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐ Prefer not to say ☐  
Any other Asian background, please write in:

#### Black/ African/ Caribbean/ Black British

African ☐ Caribbean ☐ Prefer not to say ☐  
Any other Black/African/Caribbean background, please write in:

#### Other ethnic group

Arab ☐ Prefer not to say ☐ Any other ethnic group, please write in:



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**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.

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**What is your sexual orientation?**

Heterosexual ☐ Gay ☐ Lesbian ☐ Bisexual ☐

Prefer not to say ☐ If you prefer to use your own term, please specify here

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**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:

**What is your current working pattern?**

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Full-time ☐ Part-time ☐ Prefer not to say ☐

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**What is your flexible working arrangement?**

None ☐ Flexi-time ☐ Staggered hours ☐ Term-time hours ☐

Annualised hours ☐ Job-share ☐ Flexible shifts ☐ Compressed hours ☐

Homeworking ☐ Prefer not to say ☐ If other, please write in:

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

None ☐ 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 ☐