

**Scottish Bi+ Network**

Equality & Diversity

Monitoring Form

Scottish Bi+ Network 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.

We need your help and co-operation to enable it to do this, but filling in this form is completely voluntary.

On receipt, the monitoring form will be securely stored. It will be treated as strictly confidential and will be used for statistical monitoring only. None of this information will be seen or used during the selection process.

Please place an X next to the appropriate box(es), or write in responses as necessary.

### **Gender**

|  |  |
| --- | --- |
| Intersex |  |
| Man |  |
| Non-binary |  |
| Woman |  |
| Other (please specify) |  |

### **Are you married or in a civil partnership?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

### **Age**

|  |  |
| --- | --- |
| 18 - 24 |  |
| 25 - 29 |  |
| 30 - 34 |  |
| 35 - 39 |  |
| 40 - 44 |  |
| 45 - 49 |  |
| 50 - 54 |  |
| 55 - 59 |  |
| 60 - 64 |  |
| 65+ |  |
| Prefer not to say |  |

### **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.

|  |
| --- |
| **Asian/ Asian British** |
| Bangladeshi |  |
| Chinese |  |
| Indian |  |
| Pakistani |  |
| Prefer not to say |  |
| Any other Asian background |  |

|  |
| --- |
| **Black/ African/ Caribbean/ Black British** |
| African |  |
| Caribbean |  |
| Prefer not to say |  |
| Any other Black/ African/ Caribbean background |  |

|  |
| --- |
| **Mixed/Multiple Ethnic Groups** |
| Asian and Black African |  |
| Asian and Black Caribbean |  |
| White and Asian |  |
| White and Black African |  |
| White and Black Caribbean |  |
| Prefer not to say |  |
| Any other mixed background |  |

|  |
| --- |
| **White** |
| English |  |
| Irish |  |
| Northern Irish |  |
| Scottish |  |
| Traveller |  |
| Welsh |  |
| Prefer not to say |  |
| Any other white background |  |

|  |
| --- |
| **Other Ethnic Group** |
| Arab |  |
| Prefer not to say |  |
| Any other ethnic group |  |

### **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’ for the application process or job interview, then please contact recruitment@scottishbinet.org

### **What is your sexual orientation?**

|  |  |
| --- | --- |
| Aromantic / Asexual (Aro / Ace) |  |
| Bi+ (Bi, Pan, Poly, and those who are attracted to multiple genders) |  |
| Gay |  |
| Lesbian |  |
| Straight/ Heterosexual |  |
| Prefer not to say |  |
| Other orientation |  |

### **What is your religion or belief?**

|  |  |
| --- | --- |
| Atheist / No religion or belief |  |
| Buddhist |  |
| Christian |  |
| Hindu |  |
| Jewish |  |
| Muslim |  |
| Sikh |  |
| Prefer not to say |  |
| Other religion or belief |  |

### **What is your current working pattern?**

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

### **What is your flexible working arrangement? Place an X by all that apply.**

|  |  |
| --- | --- |
| Annualised Hours |  |
| Compressed Hours |  |
| Flexible Shifts |  |
| Flexi-time |  |
| Job Share |  |
| Homeworking |  |
| Staggered Hours |  |
| Term-time Hours |  |
| None |  |
| Prefer not to say |  |
| If other, please write in |  |

### **Do you have caring responsibilities? Place an X by 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) |  |
| None |  |
| Prefer not to say |  |
| If other, please write in |  |