



Equality and Diversity Monitoring Form

TCV are committed to promoting Equality and Diversity within its workforce and we strive to meet the aims and commitments as set out in our Equality Policy. This includes not discriminating under the Equality Act 2010 and building an accurate picture of the make-up of our organisation and its workforce to encourage equality and diversity.

TCV needs your help and cooperation to enable it to do this but filing in this form is completely voluntary. You are not obliged to answer the questions on this form, and you will not suffer any penalty if you choose not to do so.

It is our policy to treat all people fairly, irrespective of age, disability, ethnic origin, gender, marital or parental status, race, religion or belief and sexual orientation.

This is sensitive personal data and will be treated with the utmost confidentiality in line with the requirements of the Data Protection Act. The data will only be used for general statistical and monitoring purposes. The data will not be used during the short-listing process and will in no way be linked to the recruitment process. We recruit solely based on ability and individual merit.

Position applied for:

Location:

Date Form Completed:

<p>Gender</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p> <p>Intersex <input type="checkbox"/></p> <p>Non-binary <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>If you prefer to use another term, please specify here:</p> <p>Age</p> <p>16-24 <input type="checkbox"/></p> <p>25-29 <input type="checkbox"/></p> <p>30-34 <input type="checkbox"/></p> <p>35-39 <input type="checkbox"/></p> <p>40-44 <input type="checkbox"/></p> <p>45-49 <input type="checkbox"/></p> <p>50-54 <input type="checkbox"/></p> <p>55-59 <input type="checkbox"/></p> <p>60-64 <input type="checkbox"/></p> <p>65+ <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>Marital status - are you married, in a civil partnership or single?</p> <p>Civil Partnership <input type="checkbox"/></p> <p>Married <input type="checkbox"/></p> <p>Partnered <input type="checkbox"/></p> <p>Single <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>Ethnic Origin</p> <p>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 from the selection in the next column.</p>	<p><u>White</u></p> <ul style="list-style-type: none"> • English <input type="checkbox"/> • Welsh <input type="checkbox"/> • Scottish <input type="checkbox"/> • Northern Irish <input type="checkbox"/> • Irish <input type="checkbox"/> • British <input type="checkbox"/> • Gypsy or Irish Traveler <input type="checkbox"/> • Prefer not to say <input type="checkbox"/> <p>Any other group not included, please include here:</p> <p><u>Mixed/Multiple ethnic groups:</u></p> <ul style="list-style-type: none"> • White and Black Caribbean <input type="checkbox"/> • White and Black African <input type="checkbox"/> • White and Asian <input type="checkbox"/> • Prefer not to say <input type="checkbox"/> <p>Any other group not included, please include here:</p> <p><u>Asian/Asian British:</u></p> <ul style="list-style-type: none"> • Indian <input type="checkbox"/> • Pakistani <input type="checkbox"/> • Bangladeshi <input type="checkbox"/> • Chinese <input type="checkbox"/> • Prefer not to say <input type="checkbox"/> <p>Any other group not included, please include here:</p> <p><u>Black / African / Caribbean / Black British:</u></p> <ul style="list-style-type: none"> • African <input type="checkbox"/> • Caribbean <input type="checkbox"/> • Prefer not to say <input type="checkbox"/> <p>Any other group not included, please include here:</p> <p><u>Another ethnic group:</u></p> <ul style="list-style-type: none"> • Arab <input type="checkbox"/> • Prefer not to say <input type="checkbox"/> <p>Any other group not included, please include here:</p>
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<p>Dependants</p> <p>Do you have caring responsibilities? If yes, please tick all that apply</p> <p>None <input type="checkbox"/></p> <p>Primary carer of a child/children (under 18) <input type="checkbox"/></p> <p>Primary carer of disabled child/children <input type="checkbox"/></p> <p>Primary carer of disabled adult (18 and over) <input type="checkbox"/></p> <p>Primary carer of older person(s) <input type="checkbox"/></p> <p>Secondary carer (another person carries out the main caring role) <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>What is your current working pattern?</p> <p>Full-time <input type="checkbox"/></p> <p>Part-time <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>What is your flexible working arrangement?</p> <p>None <input type="checkbox"/></p> <p>Flexi-time <input type="checkbox"/></p> <p>Staggered hours <input type="checkbox"/></p> <p>Term-time hours <input type="checkbox"/></p> <p>Annualised hours <input type="checkbox"/></p> <p>Job-share <input type="checkbox"/></p> <p>Flexible shifts <input type="checkbox"/></p> <p>Compressed hours <input type="checkbox"/></p> <p>Homeworking <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>If other, please include here:</p>	<p>Sexuality</p> <p>Heterosexual <input type="checkbox"/></p> <p>Gay <input type="checkbox"/></p> <p>Lesbian <input type="checkbox"/></p> <p>Bisexual <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>If you prefer to use another term, please include here –</p> <p>What is your religion or belief?</p> <p>No religion or belief <input type="checkbox"/></p> <p>Buddhist <input type="checkbox"/></p> <p>Christian <input type="checkbox"/></p> <p>Hindu <input type="checkbox"/></p> <p>Jewish <input type="checkbox"/></p> <p>Muslim <input type="checkbox"/></p> <p>Sikh <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>If other religion or belief, please include here:</p>
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<p>Disability</p> <p>Do you consider yourself to have a disability or health condition?</p> <p>The Equality Act defines a disabled person as someone who has a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <p>What is the effect or impact of your disability or health condition on your ability to give your best at work?</p> <p>Please write in here:</p> <p>The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment', then please discuss this with your leader, or the leader running the recruitment process if you are a job applicant.</p>
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