



**Equality Monitoring Form**

We want to make sure that the council is a fair and inclusive service provider. Your answers to the following questions, will help us make sure that everyone's needs are considered in council policy and practice. **The information you provide is anonymous will be kept confidential.** Only council employees will use this information.

**To safeguard anonymity,** this form will be separated from other material you send us and will be dealt with by a different set of council employees.

**Your Gender:** Male  Trans Male  Prefer not to say   
Female  Trans Female

**Thank you for helping us continue to improve our employment policies and practices!!!**

**Your Date of Birth:** / / Prefer to not say

**Your postcode:** Prefer to not say

**Ethnic Origin:**

Please choose one section from A-E and then tick the appropriate box to indicate your ethnic background or please tick this box:  
I prefer to not say

**Do you consider yourself to be disabled?**

Yes  No

**Partner preference:**

- Heterosexual / Straight
- Lesbian / Gay woman
- Gay man
- Bisexual
- Prefer not to say

**A. White:**

- British
- Irish
- Any other White background please specify:

Prefer to not say

If you tick "Yes", please tick as many boxes below as apply:

**Relationship Status:**

- Married
- Co-habiting
- Civil Partnership
- Single
- Other
- Prefer not to say

**B. Mixed Race:**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background please specify:

**Physical Impairment**

(such as using a wheelchair to get around and / or difficulty using arms, legs etc)

**Please tick the appropriate box to describe your religion or belief:**

- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- No Religion
- Other please specify:
- Prefer not to say

**C. Asian or Asian British:**

- Indian
- Pakistani
- Bangladeshi
- Any other Mixed background please specify:

**Sensory Impairment**

(such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment)

**Mental health condition**  
(such as depression or bipolar)

**Learning disability**

(such as Downs syndrome or dyslexia or cognitive impairment (such as autism or one resulting from head-injury)

**D. Black or Black British:**

- Caribbean
- African
- Bangladeshi
- Any other Mixed background please specify:

**Long-standing illness or health condition**

(such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)

**E. Other Ethnic Groups:**

- E. Other Ethnic Groups:**
- Gypsy
  - Traveller
  - Any other background please specify: