**EQUAL OPPORTUNITIES MONITORING INFORMATION**

Arthur Rank Hospice is committed to inclusivity, respect, fairness, engagement and equality of opportunity for our patients and their families, our staff and trustees, our volunteers and our supporters. We value the strength that comes with difference and the positive contribution that diversity brings to our community. We are committed to promoting equality of opportunity in all aspects of employment and we are proud to be a Disability Confident Employer.

Completing this form is voluntary. Your information will be treated in the strictest of confidence and used by us to monitor our commitments to being an inclusive employer and building a diverse workforce. Your information will only be used for the analysis of statistical data. Further information about how data is used and the basis for processing is provided in our Privacy Notice. Consent may be withdrawn at any time by contacting HR.

If you require any assistance please email [careers@arhc.org.uk](mailto:careers@arhc.org.uk)

|  |  |  |
| --- | --- | --- |
| Please state your date of birth | |  |
| Please indicate your sex | | Male  Female  Do not wish to disclose |
| Is your gender the same as the sex you were registered at birth? | | Yes  No  Do not wish to disclose |
| Please indicate the option which best describes your marital status | | |
| Married  Single  Civil partnership  Legally separated | Divorced  Widowed  Do not wish to disclose | |

**Sexual Orientation**

|  |  |
| --- | --- |
| Which of the following options best describes how you think of yourself? | |
| Heterosexual or Straight  Gay or Lesbian  Bisexual | Other sexual orientation not listed  Undecided  Do not wish to disclose |

**Race**

|  |  |  |
| --- | --- | --- |
| Please indicate your ethnic origin | | |
| **Asian / Asian British**  Bangladeshi  Indian  Pakistani  Chinese  Any other Asian background  **Black/ African/ Caribbean/ Black British**  African  Caribbean  Any other Black/ African/ Caribbean background | **Mixed/ Multiple ethnic groups**  White & Asian  White & Black African  White & Black Caribbean  Any other mixed / multiple ethnic background  **White**  English / Welsh / Scottish / Northern Irish / British  Irish  Gypsy or Irish Traveller  Any other White background | **Other Ethnic Group**  Arab  Any other ethnic group  Do not wish to disclose |

**Religion or belief**

|  |  |  |
| --- | --- | --- |
| Please indicate your religion or belief | | |
| Buddhist  Christian  Hindu | Jewish  Muslim  Sikh | Other religion  No religion  Do not wish to disclose |

**Disability**

Under the Equality Act 2010 the definition of disability is if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ adverse effect on your ability to carry out normal day to day activities. Further information regarding the definition of disability can be found here: <https://www.gov.uk/definition-of-disability-under-equality-act-2010>

|  |  |
| --- | --- |
| According to the definition of disability do you consider yourself to have a disability? | Yes  No  Do not wish to disclose |
| Please identify the category which applies to you or other type of disability. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark 'Other'. | |
| Physical impairment  Learning disability/difficulty  Sensory impairment  Long-standing illness  Mental health condition  Other | |

**Caring**

|  |  |
| --- | --- |
| Do you have unpaid caring responsibilities outside of work? | Child  Adult  None |

Thank you for completing this form. Please be assured that we monitor to get an accurate picture of our organisation and to identify and try to address any inequalities. Please return the form to [hradmin@arhc.org.uk](mailto:hradmin@arhc.org.uk)