

**Diversity and Equalities Monitoring Form**

The information you give us helps us to provide fair and equal opportunities to people who would like to become involved in National Voices’ work.

Under the Equality Act 2010 people are protected from unlawful discrimination according to the following protected characteristics: age, marriage and civil partnerships, race, religion or belief, sex, gender reassignment, sexual orientation, disability and pregnancy and maternity.

This information will be separated from any other information you provide and will be kept anonymous.

|  |  |
| --- | --- |
| Please indicate your answer with a | **x** |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your age range?**   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 16-24 |  | 25-29 |  | 30-34 |  | 35-39 |  | 40-44 |  | | 45-49 |  | 50-54 |  | 55-59 |  | 60-64 |  | Over 65 |  | |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **What is your ethnicity?** | | | | | |
| White | British |  | Mixed multi ethnic | White & Black Caribbean |  |
| Irish |  | White & Black African |  |
| Polish |  | White & Asian |  |
| Lithuanian |  | Arab |  |
| Other (please state) | | Other (please state) | |
| Asian or  Asian British | Indian |  |  | Chinese |  |
| Pakistani |  | Philippine |  |
| Bangladeshi |  | Vietnamese |  |
| Nepali |  | Thai |  |
| Other (please state) |  | Other (please state) |  |
| Black | Caribbean |  | Gypsy & Traveller | Irish Traveller |  |
| African |  | Roma |  |
| British |  | Romany Gypsy |  |
| Other (please state) | | Other Traveller (please state) | |
| Any other ethnic or nationality background not listed (please state) | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your religion or belief?** | | | | | | | |
| None |  | Christianity |  | Judaism |  | Buddhism |  |
| Islam |  | Hinduism |  | Sikhism |  | Other (please state) | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your sex?** | | | |  |  |  |  |
| Female |  | Male |  | Intersex |  | Other (please state) | |

**Does your gender identity match your sex, as registered at birth?**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Which of the following options best describes how you think of yourself?** | | | | | |
| Heterosexual or Straight |  | Gay or Lesbian |  | Bisexual |  |
| Other (please state) | | | | | |

**What is your relationship status?**

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**Do you live with any long term health conditions?**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes (if yes, please give details below) |  | No |  |
| Physical impairment (please state) | | Sensory impairment (please state) | |
| Mental health condition |  | Learning disability or difficulty |  |
| Long term illness (please state) | | Other (please state) | |

|  |  |  |  |
| --- | --- | --- | --- |
| **The Equality Act 2010 states a person has a disability if they have a physical or mental impairment which has a long term (12 month period) and substantial adverse effects on their ability to carry out day to day activities.**  **Do you consider yourself to have a disability?** | | | |
| Yes (if yes, please give details below) |  | No |  |
| Physical impairment (please state) | | Sensory impairment (please state) | |
| Mental health condition |  | Learning disability or difficulty |  |
| Long term illness (please state) | | Other (please state) | |

**The Carers Trust describes a carer as ‘anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support’.**

**Do you have caring responsibilities?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Yes |  | No |  | Previously had a caring role |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Where do you live?** | | | | | |
| South East |  | South West |  | East of England |  | |
| East Midlands |  | West Midlands |  | Yorkshire and the Humber |  | |
| North East |  | North West |  | London |  | |

|  |  |
| --- | --- |
| Date this form was completed |  |

**Thank you for taking the time to provide this information.**