

**Equality and Diversity Monitoring Form**

**Recruitment**

Western Storm Ltdis committed to meet the aims and objectives set out in its Equality, Diversity and Inclusion policy. This includes developing our insight into the diversity and experiences of our current and potential colleagues. This will enable us to deepen our understanding of the factors and issues which impact people in our community and make informed decisions to improve everyone’s involvement with the Club.

We need your help and co-operation to enable us to do this effectively and completing this form is one way we ask you to contribute. The information provided will be kept confidential and will be used for monitoring purposes. Under no circumstances will the information be used for recruitment or selection purposes, or in any manner not related to improving our ED&I approach.

This form is voluntary and if you are not comfortable completing you do not have to.

If you have any questions about the form please email recruitment@westernstorm.co.uk. Please also return completed forms to the same email address.

Please tick the most appropriate boxes below or fill in your answers where necessary:

**Gender**

[ ]  Male [ ]  Female [ ]  Intersex [ ]  Non-binary [ ]  Prefer not to say

If you prefer to state your own gender identity, please do so here:

Is the gender you identify with the same as your sex registered at birth?

[ ]  Yes [ ]  No [x]  Prefer not to say

**Age**

[ ]  16 – 24 [ ]  25 - 29 [ ]  30 – 34 [ ]  35 – 39 [ ]  40 – 44 [ ]  45 – 49

[ ]  50 – 54 [ ]  55 – 59 [ ]  60 – 64 [ ]  65 – 69 [ ]  70 – 74 [ ]  75 +

[ ]  Prefer not to say

**Ethnicity**

Ethnicity is not about nationality, place of birth or citizenship. It is about the group to which you feel you belong.

Asian or Asian British

[ ]  Indian [ ]  Pakistani [ ]  Bangladeshi [ ]  Chinese [ ]  Prefer not to say

Other Asian background, please state:

Black, African, Caribbean or Black British

[ ]  African [ ]  Caribbean [ ]  Prefer not to say

Other Black, African or Caribbean background, please state:

Mixed or Multiple ethnic groups

[ ]  White and Black Caribbean [ ]  White and Black African [ ]  White and Asian

[ ]  Prefer not to say

Other Mixed or Multiple ethnic background, please state:

White

[ ]  English [ ]  Welsh [ ]  Scottish [ ]  Northern Irish [ ]  Irish

[ ]  British [ ]  Gypsy or Irish Traveller [ ]  Prefer not to say

Any other White background, please write in:

Other ethnic group

[ ]  Arab [ ]  Prefer not to say

Other ethnic group, please state:

**Disability**

The information in this form is for monitoring purposes only. If you believe you need a reasonable adjustment then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

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 work? Please write in here:

**Sexual orientation**

[ ]  Heterosexual [ ]  Gay [ ]  Lesbian [ ]  Bisexual [ ]  Asexual [ ] Pansexual

[ ]  Undecided [ ]  Prefer not to say

If you prefer to use your own identity, please state:

**Religion and belief**

[ ]  No religion or belief [ ]  Buddhist [ ]  Christian [ ]  Hindu [ ]  Jewish

[ ]  Muslim [ ]  Sikh [ ]  Prefer not to say

Other religion or belief, please state:

**Work hours**

Please detail your current and preferred working hours

Current: [ ]  Full-time [ ]  Part-time [ ]  Prefer not to say

Preferred: [ ]  Full-time [ ]  Part-time [ ]  Prefer not to say

**Flexible working arrangements**

Please detail your current and preferred working arrangements

[ ]  None [ ]  Flexi-time [ ]  Staggered hours [ ]  Term-time hours [ ]  Annualised hours

[ ]  Job-share [ ]  Flexible shifts [ ]  Compressed hours [ ]  Homeworking [ ]  Prefer not to say

If other, please write in:

**Caring responsibilities**

Please tick all that apply

[ ]  None

[ ]  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)

[ ]  Prefer not to say

**Thank you for completing this form**