## Equal Opportunities Monitoring Form

We are committed to the promotion of diversity and equal opportunity in our employment policies, practices and procedures.

To help us implement and monitor the effect of polices we would encourage you to complete this form as fully as you can. The information you provide will be treated in the strictest confidence and will be used only for statistical monitoring.

Completion of this form is voluntary and if you do not wish to answer any question(s), this will not affect your application in any way.

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| Fleetwood Town Football Club is committed to a policy of Equal Opportunities and recruits and employs staff on the basis of skills, qualification and experience of the work to be performed, regardless of sex, age, marital status, religion, ethnic origin, physical or mental disability.  This information plays no part in the selection process. It is required for monitoring purposes only. | | | |
| Position Applied for: . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  Name: . . . . . . . . . . . . . . . . . . . . . . . . . . Middle Initial: . . . . . . . . . . . Date of Birth: . . . . . . . . . . . . . . . .  How did you hear about this vacancy? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | |
| **Ethnic Origin** | | | |
| Indian |  | Chinese |  |
| Pakistani |  | Irish |  |
| Bangladeshi |  | White British |  |
| Black African |  | Other |  |
| Black Caribbean |  | Please Specify: | |
| Other Black |  |
| Do you require a work permit to work in the UK? | | |  |
| If Yes, please give details |  | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Gender / Age (please tick)** | | | | | | | | | | | | | |
| Male | | |  | Female | | |  | Non-binary | | |  | Prefer not to say |  |
| 16- 24 |  | 25 - 34 |  | 35 - 44 |  | 45 - 54 |  | 55 - 64 |  | 65 + |  | Prefer not to say |  |

|  |  |
| --- | --- |
| **Disability Status** | |
| Do you consider that you have a disability? |  |
| Have you ever had a disability? | If so, please advise |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Marital Status (please tick)** | | | | | | | | |
| Single |  | Married |  | Divorced | |  | Separated |  |
| Other: | | | | | | | | |
| **Sexual Orientation (Please tick the boxes which describe you most closely)** | | | | | | | | |
| Lesbian / Gay | | |  | | Bisexual | | |  |
| Heterosexual | | |  | | Prefer not to say | | |  |
| If you prefer to use your own term, please specify here: | | |  | | | | | |

**Arrangements if selected for interview:**

If you have a disability, please indicate whether you would need any of the following arrangements to be made if you were invited to interview:

|  |  |  |  |
| --- | --- | --- | --- |
| Interview information on audio tape |  | Sign language or other assistance with communication at interview |  |
| Interview information in large print format |  | Wheelchair-accessible location for interview |  |
| Accessible car parking space for interview |  | Facility for personal carer, assistant or another person to accompany you at interview |  |

Any other requirements: ...................................................................................................................................................

**Carer Responsibilities:**

Carers are defined as employees with significant caring responsibilities that could have an impact on their working life. If the person has physical or mental health issues, a learning disability, is a substance misuser, or is vulnerable or frail and you provide care with their day to day living you are considered a carer. Do you have caring responsibilities? If yes, please tick all that apply…

|  |  |
| --- | --- |
| None |  |
| Primary carer of child / children (Under 18) |  |
| Primary carer of a disabled child / children |  |
| Primary carer of a disabled adult (over 18) |  |
| Primary carer of an elderly person |  |
| Secondary carer (another person carries out the main caring role) |  |
| Prefer not to say |  |