

QUAD Equal Opportunities Monitoring Form

QUAD is committed to ensuring that all job and open call applicants and members of staff are treated equally, without discrimination because of gender, sexual orientation, marital or civil partner status, gender reassignment, race, colour, nationality, ethnic or national origin, religion or belief, disability or age.

This form is intended to help us maintain equal opportunities best practice and identify barriers to workforce equality and diversity.

Please complete this form and return it with your application. The form will be separated from your application on receipt. The information on this form will be used for monitoring purposes only and will play no part in the recruitment process.

If you have any questions about the form, please contact us at
volunteer@derbyquad.co.uk

Gender Male ☐ Female ☐ Intersex ☐ Non-binary ☐ Prefer not to say ☐

If you prefer to use your own gender identity, please write in:

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

Yes ☐ No ☐ Prefer not to say ☐

Age 16-24 ☐ 25-29 ☐ 30-34 ☐ 35-39 ☐ 40-44 ☐ 45-49 ☐
50-54 ☐ 55-59 ☐ 60-64 ☐ 65+ ☐ Prefer not to say ☐

What is your ethnicity?

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

Asian or Asian British

Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐ Prefer not to say ☐

Any other Asian background, please write in:

Black, African, Caribbean or Black British

African ☐ Caribbean ☐ Prefer not to say ☐

Any other Black, African or Caribbean background, please write in:

Mixed or Multiple ethnic groups

White and Black Caribbean ☐ White and Black African ☐ White and Asian ☐

Prefer not to say ☐ Any other Mixed or Multiple ethnic background, please write in:

White



English ☐ Welsh ☐ Scottish ☐ Northern Irish ☐ Irish ☐
British ☐ Traveller/Irish Traveller ☐ Prefer not to say ☐
Any other White background, please write in:

Other ethnic group

Arab ☐ Prefer not to say ☐ Any other ethnic group, please write in:

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:

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.

What is your sexual orientation?

Heterosexual ☐ Gay ☐ Lesbian ☐ Bisexual ☐ Asexual ☐

Pansexual ☐ Undecided ☐ Prefer not to say ☐

If you prefer to use your own identity, please write in:

What is your religion or belief?

No religion or belief ☐ Buddhist ☐ Christian ☐ Hindu ☐ Jewish ☐

Muslim ☐ Sikh ☐ Prefer not to say ☐ If other religion or belief, please write in:

Thank you for completing this Equal Opportunities Monitoring Form.