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# Equality Monitoring Form - Completion Guidance

## Why we need this information and why we are asking for it?

Shipley College is actively committed to a policy of equality and opportunity for all through education and encourages applications from both men and women, from members of ethnic minority groups and from people with disabilities. In order to monitor the effectiveness of the College policy and the associated procedures, we invite all applicants to complete the form below.

*THIS SHEET IS FOR MONITORING PURPOSES ONLY. IT IS REMOVED PRIOR TO THE SELECTION PROCESS.*

In completing this form, you will help us understand who we are reaching and how to better serve everyone in our community. You do have a right not to disclose the information; however, by doing so you may impact our ability to ensure equality of opportunity.

**Disability Confident Employer** 

The Disability Discrimination Act 1995 (DDA) defines a person as disabled if they have a physical or mental impairment which has a substantial and long term (i.e. has lasted or is expected to last at least 12 months) adverse effect on one’s ability to carry out normal day-to-day activities. This definition includes conditions such as cancer, HIV, mental illness and learning disabilities.

**Guaranteed Interview Scheme**

Shipley College is committed to the employment and career development of disabled people. To demonstrate our commitment we use the Disability Symbol, which is awarded by the Employment Service. As a symbol user we guarantee an interview to anyone with a disability whose application meets the essential selection criteria for the post.

## Data Protection

The information you provide is anonymous and will not be stored with any identifying information about you unless you are the successful candidate; in which case your form will be re-matched to your application form and stored on your personnel file in line with retention timescales.

We may use anonymous statistics and data you have provided to have discussions but no information will be published or used in any way which allows any individual to be identified. All details are held in accordance with the Data Protection Act 1998.

The information that we need, as outlined in the 2010 Equality Act, includes information about age, disability, gender reassignment, marital status, maternity, race, religious belief, sex, and sexual orientation.

If you would like the form in an alternative format, or would like help in completing the form, please contact us using the details provided in the Application Information Pack.

**EQUALITY MONITORING FORM**

**CONFIDENTIAL**

**Each individual application will be given a personal reference number which will enable us to maintain the confidentiality of your application. We appreciate the time taken to complete this sheet to assist us in ensuring we fulfil our role as an Equal Opportunities Employer.**

|  |  |
| --- | --- |
| **Post Title** |  |
| **Where did you see this post first advertised?** |  |

|  |
| --- |
| **GENDER:**  Male  Female  prefer not to say |
| **Gender re-assignment**  Have you gone through any part of a process (including thoughts or actions) to change from the sex you were described as at birth to the gender you identify with, or do you intend to? (This could include changing your name, wearing different clothes taking hormones or having any gender reassignment surgery).  Yes  No  Prefer not say |

|  |  |  |  |
| --- | --- | --- | --- |
| **Age:**  Under 20  20 – 29  30 – 39  40 – 49  50 – 59  60 – 65  over 66  prefer not to say | | | |
| **How would you describe your ethnic origin? (please tick)**  Asian or Asian British – Bangladeshi  Asian or Asian British - Indian  Mixed - White & Black African  Asian or Asian British - Pakistani  Mixed - White & Black Caribbean  Mixed - any other  Asian or Asian British - any other  White - British  Black or Black British - African  White - Irish  Black or Black British - Caribbean  White - any other  Black or Black British – any other  White – other European  Chinese  Prefer not to say  Mixed - White & Asian  Any other | | | |
| **Do you consider yourself to have a disability according to the above definition?**  Yes, limited a lot  Yes, limited a little  No  prefer not to say  **Further details:**    **How does this affect you carrying out day-to-day activities?**    **If you have a disability, are there any arrangements which we can make for you if you are called for an interview?**  YES  NO  **If yes please specify (e.g. parking, ground floor venue etc):** | | | |
| **Signed: D** |  | **Date:** |  |
| If applying on line please place a cross the box to indicate signature | | | |