

2020 Intake – apptraining courses

Equal Opportunity Monitoring Form

PLEASE NOTE: The completion of this form, in whole or in part, is entirely voluntary. These details will be used for internal monitoring purposes only, to help us assess whether we are reaching all groups. These details will not be used outside appt.

Please tick one box only:							
<u>White</u>		<u>Mixed</u>					
White UK descent	<input type="checkbox"/>	White Irish descent	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>
White European descent	<input type="checkbox"/>	Any other White background	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>	Any other Mixed background	<input type="checkbox"/>
<u>Asian or Asian British</u>				<u>Black or Black British</u>			
Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	African	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>	Other (Please specify)	<input type="checkbox"/>	_____	
<u>Other Origin</u>							
Chinese	<input type="checkbox"/>	Traveller	<input type="checkbox"/>	Other EEA National (Please specify)	<input type="checkbox"/>	_____	
Other (Please specify)	<input type="checkbox"/>	_____		UK National returning to UK or arriving in UK for first time	<input type="checkbox"/>	_____	

Please tick one box only:			
Gay	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>
Heterosexual	<input type="checkbox"/>	Transexual	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>	Other	<input type="checkbox"/>

Please tick one box only:			
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Do you identify as a disabled person?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Please tick one box only:			
Christian	<input type="checkbox"/>	Muslim	<input type="checkbox"/>
Hindu	<input type="checkbox"/>	Jewish	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>	Sikh	<input type="checkbox"/>
None	<input type="checkbox"/>	Other	<input type="checkbox"/>

Please tick one box only:			
20 – 29	<input type="checkbox"/>	60 – 74	<input type="checkbox"/>
30 – 59	<input type="checkbox"/>	75+	<input type="checkbox"/>

