**EQUALITY MONITORING**

**AND DIVERSITY**

The Coleg Cymraeg Cenedlaethol (the Coleg) is committed to the principles of equality and diversity. We request the information below in order to fulfill our statutory duties under the Equality Act 2010 and to go beyond that to deal positively with any issues arising from our monitoring. The information will be treated confidentially.

Data Protection Act 2018: The information requested below is used solely for the purpose of monitoring the effectiveness of our equality policy and procedures and to enable us to ascertain whether all applicants are treated equally on the basis of the 9 protected characteristics of - gender, age, disability, racial or ethnic origin, sexual orientation, gender reassignment, religion, pregnancy / maternity, belief or marital status / civil partnership.

We would be very grateful if you could provide this information. It is anonymous and will be treated in the strictest confidence and separately from your application. The information will be placed in a spreadsheet anonymously and the form immediately destroyed. This information will not be used during the selection process.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Position applied for:** |  | | | | | | | | | |
| **Date of birth:** |  |  | / |  |  | / |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sex:**  Please put a cross against the relevant one | | | | | | |
| Female |  | Male |  | Non-binary |  |  |
| Inter-sex |  | I would rather not say |  | Other |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sexual Orientation**  Please put a cross against the relevant one | | | | | | | |
| Heterosexual |  | Gay |  | Lesbian |  | Bisexual |  |
| I would rather  not say |  |  | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Marital status / Civil partnership**  Please put a cross against the relevant one | | | | | | | |
| Married |  | Unmarried |  | Civil partnership |  | I would rather not say |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your religion or belief?**  Please out a cross against the relevant one | | | | | | | |
| Buddhist |  | Christian |  | Hindu |  | Jewish |  |
| Islamic |  | Sikh |  | No religion |  | Other |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Which ethnic group do you belong to?**  Select one by putting a cross in the relevant box to indicate your background. | | | | | | | | | |
|  | | | | | | | | | |
| **WHITE** | |  | **MIXED /MULTIPLE ETHNIC GROUPS** | | |  | **ASIAN or WELSH ASIAN (or BRITISH ASIAN)** | | |
|  | White Welsh |  |  | White and Black Caribbean | |  |  | Indian | |
|  | White British |  |  | White and Black African | |  |  | Pakistani | |
|  | White Irish |  |  | White and Asian | |  |  | Bangladeshi | |
|  | Gypsy / Irish Traveller |  |  | Any other mixed background | |  |  | Any other Asian background. | |
|  | White Other |  |  | |  | | | | |
|  | |  |  | | |  |  | | |
| **BLACK or BLACK WELSH (or BLACK BRITISH)** | |  | **OTHER ETHNIC GROUP** | | |  |  | | |
|  | African |  |  | Arab | |  |  |  | |
|  | Caribbean |  |  | Any other ethnic group | |  |  |  | |
|  | Any other Black / African / Caribbean background |  |  |  | |  |  |  | |
|  |  |  |  |  | |  |  |  | |
|  |  |  | |  |  |  | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Disability** | | | | | | The Equality Act 2010 states that a person has a disability for the purposes of this Act if he / she has a "physical or mental incapacity which has had a substantial and long-term adverse effect on his / her ability to carry out normal day-to-day activities” or have had such incapacity. | | | | | | **Do you consider yourself to be a disabled person?** | **Yes** |  | **No** |  | | **What is the effect of your disability on your ability to carry out normal day-to-day activities in the workplace?**  If you have any condition that would require special arrangements or reasonable adjustments to be made if you attend an interview, or if you are appointed, it would be greatly appreciated if you could let us know your requirements when sending in your application in order for us to facilitate the interview / appointment.  **THANK YOU FOR YOUR CO-OPERATION.** | | | | | | | | | | | | | | |