**Equality and Diversity Monitoring**

Collection of equality information is solely for monitoring purposes to ensure that our policies and procedures are effective. We also collect this data in accordance with the general and specific public sector equality duties under the Equality Act 2010.

The General Data Protection Regulation (GDPR) 2018 states that the following categories of personal data are ‘special’ and our lawful basis for processing is for reasons of substantial public interest. However, you must provide this information by explicit consent. If you chose not to provide this information, please use the box ‘prefer not to say’.

This information is kept fully confidential in accordance with our GDPR and any data you enter onto this monitoring form will only be used for monitoring purposes and will not be used in assessing and or scoring your application or during the interview process.

|  |
| --- |
| **Ethnic Group** (please tick the appropriate box) |
| White or White British | English  |  |
| Welsh |  |
| Northern Irish |  |
| Scottish |  |
| Irish |  |
| Irish Traveller |  |
| Gypsy |  |
| Other White background |  |
| Mixed race | White and Black Caribbean |  |
| White and Black African |  |
| White and Asian |  |
| Other Mixed background |  |
| Asian or Asian British | Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Chinese |  |
| Other Asian background |  |
| Black or Black British | Caribbean |  |
| African |  |
| Other Black background |  |
| Other ethnic group | Please specify: |  |
| Prefer not to say |  |  |

|  |
| --- |
| **Age** (please tick the appropriate box) |
| 16-24 |  | 25-29 |  | 30-39 |  |  |
| 40-49 |  | 50-59 |  | Over 60 |  |

|  |
| --- |
| **Personal relationship**(please tick the appropriate box) |
| Single |  |
| Living together |  |
| Married |  |
| Civil Partnership |  |
| Prefer not to say |  |

|  |
| --- |
| **Gender**(please tick the appropriate box) |
| Female |  |
| Male |  |
| Transgender |  |
| Prefer not to say |  |

|  |
| --- |
| **Disability**(please tick the appropriate box) |
| Yes |  |
| No |  |
| Prefer not to say |  |

|  |
| --- |
| If Yes, please indicate the type of disability or illness you have. Please tick all those that apply. If none apply please mark ‘Other’ and give details. |
| Physical/mobility impairment, such as a difficulty using your arms or mobility issues which require you to use a wheelchair or crutches |  |
| Visual impairment, such as being blind or having a serious visual impairment |  |
| Hearing impairment, such as being deaf or having a serious hearing impairment |  |
| Mental health condition, such as depression or schizophrenia |  |
| Learning disability/difficulty, such as Down’s syndrome or dyslexia or a cognitive impairment such as autistic spectrum disorder |  |
| Long-standing illness or health condition, such as cancer, HIV, diabetes, asthma, chronic heart disease or epilepsy |  |
| Other |  |

If you have any further queries relating to the use of personal data, please see our Privacy Notice <http://www.wmsf.ac.uk/staffvacancies1> or contact the Data Protection Officer (DPO) dataprotection@wmsf.ac.uk.