

Equalities Monitoring Form

It would be helpful for us to know about your background so we can check that we are meeting the needs of the whole community. If you feel that the group you identify with is not listed, please feel free to write this in.

Gender

Male Female.....

Age

16 - 34
 35 - 54
 55 - 64
 65 +

Do you consider yourself to have a disability?

Yes
 No

Religion and Belief

None
 Bhuddist
 Christain
 Hindu
 Jewish.....
 Muslim
 Sikh
 Any other _____
 religion - Please _____
 specify

Your ethnic background/origin

White

British.....
 Irish
 Any other White _____
 background _____
 please specify

Mixed

White and Black Caribbean
 White and Black African
 White and Asian.....
 Any other mixed _____
 background _____
 please specify

Asian or British Asian

Indian.....
 Pakistani
 Bangladeshi
 Sikh.....
 Any other Asian _____
 background _____
 please specify

Black or Black British

Caribbean
 African
 Any other Black _____
 background _____
 please specify

Chinese or other ethnic group

Chinese
 Any other _____
 background _____
 please specify

I do not wish to give this information

Declined