

MISTRYS HEALTHY OPTIONS LTD

EQUAL OPPORTUNITIES MONITORING FORM

Mistrys Healthy Options Ltd is committed to promoting fairness and eliminating discrimination from recruitment and selection practices. We will ensure that no job applicant or employee receives less favourable treatment either directly or indirectly, on the grounds of age, race, disability, gender, marital status, religion or faith or sexual orientation.

To monitor and audit the effective delivery of this commitment, Mistrys Healthy Options Ltd requests that all applicants provide the information asked for in this monitoring form.

This form will play no part in the interview process and will be treated in strict confidence. This form will be detached from your application form and transferred to our Human Resources Department to help monitor the diversity of applications we receive.

Position applied for: _____

How Did You Find Out About This Post?	
<input type="checkbox"/> Online publication/job-board (please state):	
<input type="checkbox"/> Printed publication (please state):	
<input type="checkbox"/> Agency (please state):	
<input type="checkbox"/> Social media (please state):	
<input type="checkbox"/> Other (please state):	

Your Ethnic Origin These categories are based on the Census 2011 categories.	
Asian, Asian British, Asian English, Asian Scottish, or Asian Welsh	White
<input type="checkbox"/> Asian / Asian British	<input type="checkbox"/> British
<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> English
<input type="checkbox"/> Chinese	<input type="checkbox"/> Gypsy or Irish Traveller
<input type="checkbox"/> Indian	<input type="checkbox"/> Irish
<input type="checkbox"/> Pakistani	<input type="checkbox"/> Scottish
<input type="checkbox"/> Other Asian background (specify if you wish):	<input type="checkbox"/> Welsh
	<input type="checkbox"/> Other White background (specify if you wish):
Black, Black British, Black English, Black Scottish, or Black Welsh	Mixed
<input type="checkbox"/> African	<input type="checkbox"/> White and Asian
<input type="checkbox"/> Caribbean	<input type="checkbox"/> White and Black African
<input type="checkbox"/> Other Black background (specify if you wish):	<input type="checkbox"/> White and Black Caribbean
	<input type="checkbox"/> White and Chinese
	<input type="checkbox"/> Other mixed background (specify if you wish):
Other ethnic group	Prefer not to say <input type="checkbox"/>
<input type="checkbox"/> Arab	
<input type="checkbox"/> Other ethnic group (specify if you wish):	

Your Gender

☐ Male ☐ Female ☐ Prefer not to say

Your Age

Date of Birth:

☐ 16 - 24 ☐ 25 - 34 ☐ 35 - 44 ☐ 45 - 54
☐ 55 - 64 ☐ 65+ ☐ Prefer not to say

Your Sexual Orientation

☐ Bisexual
☐ Gay man
☐ Gay woman/lesbian
☐ Heterosexual/straight
☐ Other (specify if you wish):
☐ Prefer not to say

Marriage and Civil Partnership

☐ Single
☐ Married/in a registered same-sex civil partnership
☐ Separated, but still legally married/in a registered same-sex civil partnership
☐ Divorced/formerly in a same-sex civil partnership which is now legally dissolved
☐ Widowed/Surviving partner from a same-sex civil partnership
☐ Prefer not to say

Your Religion or Belief

☐ No religion ☐ Jewish
☐ Buddhist ☐ Muslim
☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations) ☐ Sikh
☐ Hindu ☐ Other (specify if you wish):
☐ Prefer not to say

Disability

The Equality Act 2010 defines a disabled person as someone who has a physical or mental impairment which has a substantial and long-term adverse affect on their ability to carry out normal day-to-day activities.

Do you consider yourself to be disabled?

☐ Yes
☐ No

Thank you for completing this form. Please return it with your application.