

EQUALITY & DIVERSITY MONITORING FORM

The Lightwave CIO is committed to promoting a diverse workforce and to ensuring that the way applicants are selected is fair, does not contravene the law, and upholds the Diocese's equal opportunities policy. **We ask for your co-operation** in answering the questions below to provide us with statistical information to help us monitor our recruitment and selection processes

This information will not affect your application in any way. It will be separated from your application form upon receipt (whether in hard copy or electronically) and recorded in strict confidence.

If you prefer you may send this form separately to: Diocesan Office, St Nicholas Centre, 4 Cutler Street, Ipswich IP1 1UQ marked STRICTLY PRIVATE – TO BE OPENED ONLY BY THE MONITORING OFFICER or email it to: HR@cofesuffolk.org

JOB DETAILS

Post applied for

Where did you hear about this vacancy?

Publication (please specify)	
Lightwave website	
Diocesan website	
Other (please specify)	

PERSONAL DETAILS

Gender:

Female

Male

I do not wish to supply this information

Age:

16-25

26-35

36-45

46-55

56-65

65-70

Over 70

I do not wish to supply this information

Marital

Single

Married

In a civil partnership

Civil partnership dissolved

Separated

Divorced

Married after divorce with former partner still living

I do not wish to supply this information

DISABILITY

Do you consider yourself to have a disability or long term health condition as defined by the Disability Discrimination Act?

Yes

No

I do not wish to supply this information

Please indicate the nature of any adjustments you would need to be made to enable you to carry out the role for which you have applied:

ETHNICITY

Please choose one section from A to E then tick the appropriate box to indicate your cultural background.

A: White

White British	<input type="checkbox"/>
White Irish	<input type="checkbox"/>
Other White background (specify below)	<input type="checkbox"/>

B: Mixed

White and Black Caribbean	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>
Other Mixed background (specify below)	<input type="checkbox"/>

C: Asian or Asian British

Indian	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>
Other Asian background (specify below)	<input type="checkbox"/>

D: Black or Black British

Black or Black British Caribbean	<input type="checkbox"/>
Black or Black British African	<input type="checkbox"/>
Other Black background (specify below)	<input type="checkbox"/>

E: Chinese or other ethnic group

Chinese	<input type="checkbox"/>
Any other ethnic group (specify below)	<input type="checkbox"/>

If you have selected 'Other' please specify here:

I do not wish to supply this information

YOUR NAME

(Used solely to help us monitor the integrity of our appointment process AFTER completion of all stages)

DECLARATION

I consent to the information given on this form being held on file under the terms of the Data Protection Act 1998. (Please initial or check the box)

For office use

Applicant Ref No:

Application withdrawn

Post withdrawn

Short listed

Yes

No

Appointed

Yes

No