

Equality and Diversity Monitoring Form

David Livingstone Birthplace



The David Livingstone Birthplace aims to provide equal opportunities and fair treatment for all our volunteers and staff. Completing this form enables us to understand our paid staff and volunteers better, ensure we are being inclusive in our recruitment practices and identify any changes we could make to be more representative of the communities we work with and want to work with.

The information you provide will be held anonymously and securely, in line with the Data Protection Act 2018. Please complete the form and return it as per the instructions at the end of the document. The David Livingstone Birthplace is committed to offering clear and accessible application processes and programmes that are open to everyone. On request this information is available in alternative formats including translations and access support is available for disabled applicants. Please let us know if you would like the form in an alternative format.

Completing the form is voluntary and it will not have an impact on your application if you choose not to return it. The form will be separated from your application upon receipt and the information recorded will not be considered as part of the shortlisting process.

PLEASE NOTE: the monitoring information collected on this form is strictly confidential and will be stored securely for 12 months after your application has been received. You can ask us to delete this information at any time by emailing sandra@david-livingstone-birthplace.org

Ethnicity

Please tick the box which most closely describes what you consider to be your ethnic origin.

<p>Asian</p> <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Any other Asian background (please specify below)	<p>Black</p> <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other black background (please specify below)	<p>Chinese/Other Ethnicity</p> <input type="checkbox"/> Chinese <input type="checkbox"/> Any other ethnic group (please specify below)
<p>Mixed</p> <input type="checkbox"/> White/Black Caribbean <input type="checkbox"/> White/Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other mixed background (please specify below)	<p>White</p> <input type="checkbox"/> Scottish <input type="checkbox"/> English <input type="checkbox"/> Irish <input type="checkbox"/> Northern Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Welsh <input type="checkbox"/> British <input type="checkbox"/> Any other White background (please specify below)	<p>Undisclosed</p> <input type="checkbox"/> Prefer not to say

Other: _____

What is your nationality? _____

Prefer not to say

Age

- | | |
|--------------------------------|--|
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 55-64 |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 65-74 |
| <input type="checkbox"/> 35-44 | <input type="checkbox"/> prefer not to say |
| <input type="checkbox"/> 45-54 | |

What is your date of birth?

DD/MM/YY

Disability

Do you consider yourself to have a disability?

- Yes No Prefer not to say

Gender

- Male Female Non-binary Prefer not to say

If you prefer to use your own term, please specify here

Faith

Please tick the box which most closely describes the group you most identify with.

- | | | |
|---|------------------------------------|--|
| <input type="checkbox"/> No religious faith | <input type="checkbox"/> Christian | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Baha'i | <input type="checkbox"/> Buddhist |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> Jain | <input type="checkbox"/> Sikh |
| <input type="checkbox"/> Other (please specify below) | | <input type="checkbox"/> Prefer not to say |

Other: _____

Sexual Orientation

How would you describe your sexual orientation?

- Bisexual Gay man Heterosexual / Straight
 Gay woman / Lesbian Prefer not to say

If you prefer to self-identify, please specify here _____

Date of completion: _____

Thank you for the completing this form. Please send the completed form to:
Sandra Lowson, Project Support sandra@david-livingstone-birthplace.org