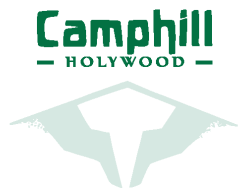
****

Diversity Monitoring Form

Camphill Holywood strives to meet the aims and commitments set out in our Equality and Diversity policy. Whether it is in the provision of services, or in the work and recruitment of co-workers, employees or casual volunteers, Camphill Holywood strives to cultivate a culture of difference and acceptance. One of the ways in which we do this is by collecting information which we can then use to monitor the fairness of our processes, we aim to ensure that our Equality & Diversity Policy is being followed and that unfair discrimination is not taking place.

We hope you will help us by completing this form however, completing the form is entirely voluntary and, if you choose not to complete it, this will not affect your application. The information you provide is confidential and will be stored securely, with access limited to only designated members of staff.

You can email or post the completed form marked ‘Strictly confidential’ to:

[lauren@camphillholywood.co.uk](mailto:lauren@camphillholywood.co.uk)

Administrator

Camphill Holywood

8 Shore Road

Holywood

Co. Down

BT18 9HX

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Gender identity** |  | Male |  | Female |
|  |  | Other |  | Prefer not to say |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Age** |  | 16-25 |  | 26-35 |  | 36-45 |  | 46-55 |  | 55-64 |  | Over 65 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Disability Discrimination Act** | | | | |
| Section 1 of the Disability Discrimination Act describes a disabled person as person with a ‘physical or mental impairment which has a substantial or long-term effect on his/her ability to carry out normal day-to-day activities’. | | | | |
| **Under this definition, do you consider yourself to have a disability?** |  | Yes |  | No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Are you married or in a civil partnership?** |  | Yes |  | No |  | Prefer not to say |

|  |  |  |  |
| --- | --- | --- | --- |
| **What is your sexual orientation?** | | | |
|  | Heterosexual |  | Bisexual |
|  | Gay woman (lesbian) |  | Gay man |
|  | Prefer not to say |  | Other |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ethnic Origin** | | | | |
| What is your ethnic group, please tick | | | | |
| **White** |  | British |  | Irish |
|  |  | English |  | Welsh |
|  |  | Scottish |  | Northern Irish |
|  |  | Other |  | Prefer not to say |
| **Mixed/multiple ethnic groups** |  | White and Black Caribbean |  | White and Black African |
|  | White and Asian |  | Any other mixed background |
| **Asian/Asian British** |  | Indian |  | Pakistani |
|  |  | Bangladeshi |  | Any other Asian background |
| **Black** |  | Caribbean |  | African |
|  |  | Any other Black background |  |  |
| **Chinese or other ethnic group** |  | Chinese |  | Any other ethnic background |

|  |  |
| --- | --- |
| **What is your religious/belief background?** | |
| Regardless of whether we practice a particular religion, most of us in Northern Ireland are seen as either Catholic or Protestant. We therefore ask you to indicate your community background by ticking the appropriate box below. | |
| I am a member of the Protestant Community |  |
| I am a member of the Roman Catholic Community |  |
| I am a member of neither the Protestant or Roman Catholic Community |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **What is your religion/belief?** | | | | | |
|  | No religion or belief |  | Christian |  | Buddhist |
|  | Hindu |  | Jewish |  | Muslim |
|  | Atheist |  | Rastafarian |  | Sikh |
|  | Prefer not to say |  | Other (please indicate)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  |  |

|  |  |
| --- | --- |
| **Do you have caring responsibilities?** | |
|  | None |
|  | Primary carer of a child/children (under 18) |
|  | Primary carer of a disabled child/children (under 18) |
|  | Primary carer of disabled adult (18 and over) |
|  | Primary carer of an older person (65+) |
|  | Secondary carer (another person carries out the main role) |
|  | Prefer not to say |

|  |  |  |  |
| --- | --- | --- | --- |
| **How did you hear about this vacancy?** | | | |
|  | Camphill Holywood website |  | Community NI |
|  | Other internet website?  Please state |  | Word of mouth |
|  |  |

Thank you for completing this form.

If posting your application, please return this form a sealed envelope.