

# WORKPLACE FOUNDATION

## Equal Opportunities & Diversity Monitoring Form

Workplace Foundation seeks to be an inclusive organisation and want to ensure that all aspects of our work reflect diversity and support equality of opportunity.

The information you provide in this form helps us to identify areas of under-representation among applicants and assists in developing strategies to attract people from these groups, also ensuring there is no discrimination in the allocation of support and / or opportunities.

The information provided in this form is strictly confidential and will be kept separate from your application. Your answers here will not affect your application to any of our opportunities. The form will be separated from your application upon receipt, remain anonymous, and the data will not be taken into account in shortlisting or determining your suitability for the post.

*If there are questions you'd rather not answer, please just tick "Prefer not to say" or skip to the next question.*

<b>1. Role / opportunity you are applying for (or undertaking) at Workplace Foundation:</b>	
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<b>2a. If you live in the UK what is your full postcode:</b>	
<b>2b. If you live outside of the UK, what is your country of residence:</b>	

<b>3. How would you describe your gender (please mark box below):</b>	
Female	
Male	
Transgender	
Non-binary/Non-conforming	
Bigender/Gender fluid	
Prefer to use own term	
Prefer not to say	
<b>If you prefer to use your own term, please specify here</b>	

<b>4. Is your gender identity the same as the one assigned to you at birth?</b>	
Yes	
No	
Prefer not to say	

<b>5. What sexuality do you identify with (please mark box below):</b>	
Bisexual	
Gay man	
Gay woman/Lesbian	
Heterosexual/Straight	
Queer	
Asexual	
Prefer to use own term	
Prefer not to say	
Other	
<b>If you prefer to use your own term, please specify here</b>	

<b>6. What is your age range? (please mark box below):</b>	
0-15	
16-19	
20-34	
35-49	
50-64	
65+	
Prefer not to say	

<b>7a. How would you describe your ethnicity (please mark box below):</b>		
<b>White</b>	British	
	Irish	
	Gypsy or Irish Traveller	
	Any Other White background*	
<b>Mixed</b>	White and Black Caribbean	
	White and Black African	
	White and Asian	
	Any other Mixed background*	
<b>Asian or Asian British</b>	Indian	
	Pakistani	
	Bangladeshi	
	Chinese	
	Any other Asian background*	
<b>Black or Black British</b>	African	
	Caribbean	
	Any other Black / African / Caribbean background*	
<b>Other</b>	Arab	
	Any other ethnic group*	
	Prefer to self identify	
	Prefer not to say	

<b>7b. * If you prefer to self-identify, please specify here</b>	
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<b>8. Religion/Belief (please mark box below):</b>	
No religion or belief	
Buddhist	
Christian (all denominations)	
Hindu	
Jewish	
Muslim	
Sikh	
Prefer to self-describe	
Prefer not to say	
<b>If you prefer to self-describe, please specify here</b>	

<b>9. Do you consider yourself to have a disability or impairment (please mark box below):</b>	
Yes*	
No	
Not sure	
Prefer not to say	

**\*If Yes, please indicate below:**

Visual impairment	
Hearing impairment / Deaf	
Speech impairment	
Mobility impairment	
Physical disabilities	
Cognitive or learning disabilities	
Mental health condition	
Other long term / chronic conditions	
Prefer to use own term	
Prefer not to say	
<b>If you prefer to use your own term, please specify here</b>	

<b>10. Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? (please mark box below):</b>	
Yes, limited a lot	
Yes, limited a little	
No	
Prefer not to say	

## Socio-economic Background

Workplace Foundation are committed to addressing socio-economic inequality alongside other protected characteristic groups. To better understand this we would like to ask a number of questions about you, your parents or care givers.

<b>11. What is your current employment status (please tick all that apply):</b>	
Employed	
Self-employed	

Unemployed	
Student	
Unable to work through illness	
Prefer not to say	

<b>12. What is your highest qualification (please mark box below):</b>	
No formal qualifications	
Further Education (AS, A-Level, Diploma, NVQ level 2/3)	
Higher education	
Higher education (Postgraduate / Doctorate)	
Vocational training	
Not applicable	
Prefer not to say	
Other	
<b>If other, please specify here:</b>	

<b>13. If you went to university (to study a BA or BSc course or higher), were you part of the first generation of your family to do so (please mark box below):</b>	
Yes	
No	
Did not attend University	
Prefer not to say	

<b>14a. Did you mainly attend a state or a fee-paying school between the ages of 11 and 18 (please mark box below):</b>	
UK State School	
UK Independent fee-paying school	
Attended school outside UK	
Other	
Prefer not to say	
<b>If other, please specify here:</b>	

<b>14b. If you attended a fee-paying school, did you ever receive any kind of financial award to cover 50% or more of the school fees?</b>	
Yes	
No	

<b>15. What did your parent / caregiver do when you were around 14 years old</b>	
Prefer not to say	

**Feedback**

We want to be able to learn, reflect and make positive change within our organisation. As such, we invite you to give any feedback about this form, or make any other comments / observations / suggestions that will support inclusivity, diversity and equality of opportunity.

**16. If you wish to give feedback, please give details here**

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*Thank you for completing this form.  
Please return to [info@workplacefoundation.art](mailto:info@workplacefoundation.art)*