**EQUAL OPPORTUNITIES MONITORING**

IPSO is committed to the promotion of equal opportunities within the organisation through the way we manage the organisation and provide services to the community. We welcome applications from all section of the community.

Information provided through this form will not form part of the consideration of your application; it will be used solely for monitoring of applicants, short listed applicants and those appointed. Please only complete this form if you are happy for the data to be used in this way.

**Gender:**

⬜ Female

⬜ Male

⬜ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

⬜ Prefer not to say

**Date of Birth:** ……………………………

**Ethnicity**

How would you describe your ethnic origin?

………………………………………….

⬜ Prefer not to say

**Religion**

Do you consider yourself to be a person of religious faith?

⬜ Yes

⬜ No

If the answer to the above is yes, how would you describe your religious faith?

………………………………………….

**Disability**

The Equality Act defines disability as ‘A physical or mental impairment which has a substantial and long-term negative effect on your ability to do normal day-to-day activities’.

Do you consider yourself to have a disability? ⬜ Yes ⬜ No

If yes, please state the nature of the disability:

…………………………………………

*Thank you for your co-operation. Please be assured your response is confidential, and will be used solely for monitoring purposes. All responses will be destroyed after six months.*