

ICET Equalities Monitoring

We want to make sure that we are an equal opportunities employer. This is why we want to monitor our recruitment procedures. We will separate this part of the form from the application. It will not form part of the selection process.

Please describe your gender identity? *please tick the appropriate box*

Male ☐ Female ☐ Prefer not to say ☐

Is your gender identity the same as the gender you were assigned at birth?
please tick the appropriate box

Yes ☐ No ☐ Prefer not to say ☐

Are you currently Pregnant or have you had a baby in the last 6 months?
please tick the appropriate box

Yes ☐ No ☐ Prefer not to say ☐

How old are you? *please tick the appropriate box*

0 to 9	<input type="checkbox"/>	10 to 19	<input type="checkbox"/>
20 to 29	<input type="checkbox"/>	30 to 49	<input type="checkbox"/>
50 to 64	<input type="checkbox"/>	65 to 74	<input type="checkbox"/>
75+	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>

Do you have a disability? *please tick the appropriate box*

Yes ☐ No ☐ Prefer not to say ☐

If Yes, please tick the appropriate box(es)

Mental Health	<input type="checkbox"/>	Physical Disability	<input type="checkbox"/>
Hearing Impairment	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>
Sight Impairment	<input type="checkbox"/>	Other	<input type="checkbox"/>

What is your religion or belief? *please tick the appropriate box*

None	<input type="checkbox"/>	Christian	<input type="checkbox"/>	Hindu	<input type="checkbox"/>	Jewish	<input type="checkbox"/>
Muslim	<input type="checkbox"/>	Sikh	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>

Any other (please write in)

How would you describe your ethnic origin?

please tick one box only

A) White

- | | |
|------------------------|--------------------------|
| English | <input type="checkbox"/> |
| Welsh | <input type="checkbox"/> |
| Scottish | <input type="checkbox"/> |
| Northern Irish | <input type="checkbox"/> |
| Irish | <input type="checkbox"/> |
| Gypsy or Traveller | <input type="checkbox"/> |
| Other White Background | <input type="checkbox"/> |

C) Asian or Asian British

- | | |
|------------------------|--------------------------|
| Indian | <input type="checkbox"/> |
| Pakistani | <input type="checkbox"/> |
| Bangladeshi | <input type="checkbox"/> |
| Chinese | <input type="checkbox"/> |
| Other Asian Background | <input type="checkbox"/> |

B) Mixed / Multiple ethnic Background

- | | |
|-----------------------------------|--------------------------|
| White & Black Caribbean | <input type="checkbox"/> |
| White & Black African | <input type="checkbox"/> |
| White & Asian | <input type="checkbox"/> |
| Other Mixed / multiple background | <input type="checkbox"/> |

D) Black or Black British

- | | |
|------------------------|--------------------------|
| Caribbean | <input type="checkbox"/> |
| African | <input type="checkbox"/> |
| Other Black Background | <input type="checkbox"/> |

E) Other ethnic group (please state)

Prefer not to say

☐

If you are 16 or over which of the following options best describes how you think of yourself? *please tick the appropriate box(es)*

- | | |
|-------------------------|--------------------------|
| Bisexual | <input type="checkbox"/> |
| Gay Man | <input type="checkbox"/> |
| Gay Women / Lesbian | <input type="checkbox"/> |
| Heterosexual / Straight | <input type="checkbox"/> |
| Married | <input type="checkbox"/> |
| Single | <input type="checkbox"/> |
| Civil Partnership | <input type="checkbox"/> |
| Prefer not to say | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |

Please return this completed form with your application.

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