



Equal Opportunities Monitoring Form

Please note:

This information will only be used for monitoring purposes and will be treated as Strictly Confidential.

Date of Birth:

Age:

Ethnic Origin

I would describe my ethnic origin as: *(Please tick as appropriate)*

- | | |
|---|--|
| <input type="checkbox"/> Asian or Asian British – Indian | <input type="checkbox"/> Mixed White & Black African |
| <input type="checkbox"/> Asian or Asian British – Pakistani | <input type="checkbox"/> Other Mixed background |
| <input type="checkbox"/> Asian or Asian British – Bangladeshi | <input type="checkbox"/> Other British |
| <input type="checkbox"/> Other Asian Background | <input type="checkbox"/> White British |
| <input type="checkbox"/> Black or Black British - Caribbean | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Black or Black British - African | <input type="checkbox"/> White Other |
| <input type="checkbox"/> Other Black Background | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Mixed White & Asian | <input type="checkbox"/> Any Other Ethnic Background |
| <input type="checkbox"/> Mixed White & Black Caribbean | <input type="checkbox"/> Prefer not to say |

Gender Male Female

Disability

- I am a registered disabled person I consider myself to have a disability

Date:

Please return to:
Emma Thompson, Director of Resources
Onside Independent Advocacy
Williamson House, 14 Charles Street,
Worcester WR1 2AQ