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| **RECRUITMENT MONITORING FORM****Please complete this monitoring form. The information will not be used as part of the selection process and will enable the diocese to monitor the diversity of applicants applying for its offices. You may tick the ‘prefer not to say’ box for any questions that you do not wish to answer.**  |
|  |  |  |  |
| **Application for the post of:** |  |
|  |  |  |  |
| **1 What is your ethnic group?** |
| ***A*** *White* |
| British |  |  |  | Irish |  |
| Other  |  |  |  |
|  |  |
| ***B*** *Mixed* |  |  |
| White/ Black Caribbean |  | White/Asian |  |
| White/Black African |  |  Other |  |
|  |
| ***C*** *Asian or Asian British* |  |  |
| Asian British |  | Pakistani |  |
| Bangladeshi |  |  | Indian |  |
| Other  |  |
| ***D*** *Black or African or Caribbean or Black British* |  |  |
| African |  | Caribbean African |  |
| Black British |  | Other  |  |
| ***E*** *Other group* |  |  |  |  |
| Chinese |  | Other |  |
| ***F*** *Prefer not to say*  |
| **2 Gender** |  |  |
| Male |  | Female |  | Prefer not to say |  |
|  |  |  |
| **3 Disability** |  |  |  |
| Do you consider yourself to have a disability or a long-term health condition? |
| Yes |  | No |  | Prefer not to say |  |
| **4 Marital Status** |  |  |  |
| Single |  | Separated |  |
| Married  |  | Divorced |  |
| In a civil partnership |  | Civil partnership dissolved |  |
|  |  | Widowed |  |
|  |  | Prefer not to say |  |