Transform Drug Policy Foundation Equality and diversity monitoring form

Please email this completed form to emma@transformdrugs.org

In order to support equality and diversity in recruitment, we need to develop an accurate picture of the make-up of our applicants. Completing this form and returning it to us will help us achieve this, but please note that **completion is voluntary**.

The information provided in this form is kept separately from all information used in recruitment decisions. All information is strictly confidential, and only used to ensure that our policies are being applied fairly.

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C	Gender
M	Male □ Female □ Intersex □ Non-binary □ Prefer not to say □
lf	f you prefer to use your own term, please specify here
С	Does your gender identity match your sex as registered at birth?
Y	Yes □ No □ Prefer not to say □
Age	
18-29	□ 30-44 □ 45-60 □ 60+ □
E	Ethnicity
V	White
British	Irish \square Gypsy or Irish Traveller \square Other European \square Prefer not to say \square
Any ot	ther white background, please specify:
N	Mixed/multiple ethnicity
V	White and Black Caribbean \square White and Black African \square White and Asian \square Prefer not to say \square
Д	Any other mixed background, please specify:

Asian/Asian British
Indian \square Pakistani \square Bangladeshi \square Chinese \square Prefer not to say \square
Any other Asian background, please specify:
Black/ African/ Caribbean/ Black British
African □ Caribbean □ Prefer not to say □
Any other Black/African/Caribbean background, please specify:
Other ethnic group Arab □ Prefer not to say □
Any other ethnic group, please specify:
Do you consider yourself to have a disability or long-term health condition?
Yes □ No □ Prefer not to say □
The Equality Act of 2010 defines disability as 'a physical or mental impairment with long term substantial adverse effects on ability to perform day to day activities'.
What is your sexual orientation?
Heterosexual \square Gay \square Lesbian \square Bisexual \square Prefer not to say \square
If you prefer to use another term, please specify here
What is your religion or belief?
No religion or belief $\ \square$ Buddhist $\ \square$ Christian $\ \square$ Hindu $\ \square$ Jewish $\ \square$
Muslim \square Sikh \square Prefer not to say \square
Any other belief, please specify: