

**EQUAL OPPORTUNITIES MONITORING FORM**

**This information will be treated in the strictest confidence and will be used only for statistical monitoring.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Birth** |  | **Gender** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Marital Status** | **Single** |  | **Married** |  |
| **Civil Partnership** |  | **Other (please specify):** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ethnic Origin** | **English / Welsh / Scottish / Northern Irish / British** |  | **White and Black Caribbean** |  |
| **Irish** |  | **White and Black African** |  |
| **Gypsy or Irish Traveller** |  | **White and Asian** |  |
| **Any other white background** |  | **Any other Mixed / Multiple ethnic background** |  |
| **Indian** |  | **Pakistani** |  |
| **Bangladeshi** |  | **Chinese** |  |
| **African** |  | **Caribbean** |  |
| **Any other Asian background** |  | **Any other Black / African / Caribbean background** |  |
| **Arab** |  | **Any other ethnic group** |  |
| **Not Known** |  | **Prefer not to say** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Do you consider yourself to have a disability?** | **Yes** |  | **No** |  | **Prefer not to say** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sexual Orientation** | **Bisexual** |  | **Gay** |  |
| **Heterosexual/Straight** |  | **Prefer not to say** |  |

**NB.** This information is requested by Sheffield Theatres as an employer’s legitimate interest. The information will used on Annual Reports to the Arts Council and will be kept strictly confidential for no more than 18 months. The information will be confidently shredded once it is entered into the report.