**Development Trusts Association: Equal Opportunities Monitoring Form**

Please assist us in monitoring the effectiveness of our equal opportunities policy by answering the questions below and returning this with your application form.

**Please note that the form will be detached from your application form immediately on receipt and will not be identified to you in any way.** Your application will not be affected if you choose not to complete it.

**Please tick the boxes:**

1. What is your gender?

 female  male  non binary  other

2. What is your age?

3. Which of the following best describes your ethnicity or cultural origins?

 White British  Black British

 Welsh  Other European

 Irish

 Caribbean  African

 Indian  Pakistani

 Bangladeshi  Chinese

 Other (please describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Do you consider yourself to have a disability or health condition ?

 yes  no

If YES, how would you describe your disability?

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*Thank you for completing this form*