****

**Equal Opportunities monitoring form**

RADA aims to have an inclusive environment for all staff and students by identify and removing barriers in our practices. Completing the monitoring form will help us to achieve this, and also help RADA meet our obligations under the Equality Act 2010. Whilst it is voluntary to disclose this information, doing so will enable us to better understand the composition of our workforce and examine our practices.

Your answers will be treated in the strictest of confidence, and all date disclosed to HESA will comply with the Data Protection Act 2018. Our equality, diversity and inclusion policy can be found here <https://www.rada.ac.uk/about-us/equality-and-diversity-policy/> .

We value the privacy of all our applicants, students, visitors, supporters, employees and customers, and strive to meet the highest standards in managing your personal information. The privacy notice found in the link below explains how we collect and manage personal information, and how we comply with data protection law - <https://www.rada.ac.uk/privacy/> .

**This form will be separated from the rest of your application information and will NOT be seen by the shortlisting panel.**

**Name:**

**Position applied for:**

1. **What is your age bracket:**

16-24 [ ]

25-29 [ ]

30-34 [ ]

35-39 [ ]

40-44 [ ]

45-49 [ ]

50-54 [ ]

55-59 [ ]

60-64 [ ]

65+ [ ]

Prefer not to say [ ]

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

No known disability. [ ]

Two or more impairments and/or disabling medical conditions. [ ]

A specific learning difficulty such as dyslexia, dyspraxia or AD (H) D. [ ]

General learning disability(such as Downs Syndrome) [ ]

A social/communication impairment. [ ]

A long-standing illness or heath condition. [ ]

A mental health condition such as depression, schizophrenia or anxiety disorder. [ ]

A physical impairment or mobility issue. [ ]

Dear or serious hearing impairment. [ ]

Blind or serious visual impairment uncorrected by glasses. [ ]

A disability, impairment or medical condition that is not listed above. [ ]

Information refused. [ ]

1. **What is your ethnicity?**

***Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong.***

White [ ]

Gypsy or Traveler [ ]

Black or Black British – Caribbean [ ]

Black or Black British – African [ ]

Other Black Background [ ]

Asian or Asian British – Indian [ ]

Asian or Asian British – Pakistani [ ]

Asian or Asian British – Bangladeshi [ ]

Chinese [ ]

Other Asian Background [ ]

Mixed – White and Black Caribbean [ ]

Mixed – White and Black African [ ]

Mixed – White and Asian [ ]

Other mixed background [ ]

Arab [ ]

Other ethnic background [ ]

Not known [ ]

Information refused [ ]

1. **What is your nationality:**

…………………………………………………………………………………………………………………….

1. **What is your current gender:**

Male [ ]

Female [ ]

Intersex [ ]

Androgyne [ ]

Intergender [ ]

Ambigender [ ]

Gender fluid [ ]

Polygender [ ]

Gender queer [ ]

Prefer not to say [ ]

1. **Are you married or in a civil partnership?**

Yes [ ]

No [ ]

Prefer not to say [ ]

1. **What is your religion or belief?**

No religion or belief [ ]

Buddhist [ ]

Christian [ ]

Hindu [ ]

Jewish [ ]

Muslim [ ]

Sikh [ ]

Prefer not to say [ ]

Other religion or belief [ ]

(please specify): ……………………………………………………………………………………………..

1. **Is your current gender identity the same as the gender assigned at your birth?**

Yes [ ]

No [ ]

Information refused [ ]

1. **What is your sexual orientation?**

Heterosexual [ ]

Gay woman/lesbian [ ]

Gay man [ ]

Bisexual [ ]

Prefer not to say [ ]

Other [ ]

(please specify): ……………………………………………………………………………………………..

Thank you for completing this form.