

Equal Opportunities Monitoring Form



TÿElis aims to treat everyone equally. This monitoring form is for statistical purposes only and will be separated from your new referral form and destroyed once the data has been collected.

Gender(please tick as appropriate)

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

Marital Status (please tick as appropriate)

Married	<input type="checkbox"/>	Single	<input type="checkbox"/>	Partnered	<input type="checkbox"/>
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Ethnicity (please circle as appropriate):

White English Other British Irish Any other White background	Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background	Mixed White and Black Caribbean White and Black African White and Asian Any other Mixed background
Black or Black British Caribbean African Any other Black background	Chinese	Other ethnic group

Do you consider yourself to have a disability? (please tick as appropriate)

The Disability Discrimination Act defines disability as “a physical or mental impairment which has a substantial and long term effect on the person’s ability to carry out normal day to day activities”. Please tick as appropriate:

Yes	<input type="checkbox"/>	If Yes, please state the nature of your disability
No	<input type="checkbox"/>	

Armed Forces(please tick if appropriate)

I am a serving member of the Armed Forces	<input type="checkbox"/>
I am an Armed Forces veteran	<input type="checkbox"/>
I am from a military family or background	<input type="checkbox"/>

Age(please tick as appropriate)

18-25	<input type="checkbox"/>	26-35	<input type="checkbox"/>	36-45	<input type="checkbox"/>	56-65	<input type="checkbox"/>
66+	<input type="checkbox"/>						

Data Protection Act:

Tÿ Elis will process and store all data in compliance with the Data Protection Act 1998.