

Monitoring Form

Job Ref: ADM2023

This will be separated from your application upon receipt. This information is used for monitoring of equality information only.

1. GenderMaleFemale		
I do not wish to answer Date of Birth		
2. Sexual Orientation		
I am Heterosexual I am Gay or Lesbian (Homosexual) I am Bisexual Other (Specify)		
I do not wish to answer		
3. Marital Status Single Separated/Divorced	Married Widowed	

4. Community Background		
I am a member of the Protestant Com	munity	
I am a member of the Roman Catholic	c Community	
I am a member of neither the Protesta Catholic Community	ant nor Roman	
5. Religious Belief		
Do you have a religious belief?		
YES NO		
If yes are you:		
Roman Catholic	Presbyterian	
Church Of Ireland	Methodist	
Baptist	Muslim	
Hindu	Jewish	
Buddhist	Sikh	
Baha'i		
Other (Please Specify		
6. Those With and Without Depend	ants	
Do you look after, or give any neighbours or dependants becau problem or an issue related to old a	se of a long term	-
Yes	No	

Dependants as regards young people/children?
Yes No
7. Disability
The definition of a disability in the Disability Discrimination Act 1995 is: A physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.
Do you meet (or have you, in the past, met) this definition? Yes No
IF YES, please tick below the heading which describes it best.
Mobility
Vision
Hearing
Speech
Dexterity / Co-Ordination
Mental
Learning
Other (Please specify)
8. Ethnic Origin
White Chinese Irish Traveller Indian
Bangladeshi Black African Black Caribbean
Black Other (Please Specify)
Mixed Ethnic Group (Please Specify)

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