**Workforce Diversity**

Care for Veterans aims to achieve high employment standards by maintaining a diverse workforce and promoting equal opportunities for job applicants and all members of existing staff regardless of sex, age, race, gender, disability, beliefs or sexual orientation.

In order to help us monitor our practices and to provide essential information to the Care Quality Commission we would greatly appreciate you completing this form. The information you give us will be kept in strictest confidence and only be used to provide internal reports on our workforce diversity, to identify improvements in our practices such as recruitment and selection, and to provide anonymous statistics to external bodies when required.

The information you provide will stay confidential and be stored securely.

Please return the completed form to the H.R. Team, in an envelope marked ‘Strictly confidential.’

**Name** Prefer not to say 🗆 **Job Role** (in post or applied for):

**Gender** Male 🗆 Female 🗆 Prefer not to say 🗆

**Are you married or in a civil partnership?** Yes 🗆 No 🗆 Prefer not to say 🗆

**Age** 16-24 🗆 25-29 🗆 30-34 🗆 35-39 🗆 40-44 🗆 45-49 🗆 50-54 🗆55-59 🗆 60-64 🗆 65+ 🗆 Prefer not to say 🗆

**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. Please tick the appropriate box.

White

English 🗆 Welsh 🗆 Scottish 🗆 Northern Irish 🗆 Irish 🗆

British 🗆 Gypsy or Irish Traveller 🗆 Prefer not to say 🗆

Any other white background, please write in:

**Mixed/multiple ethnic groups**

White and Black Caribbean 🗆 White and Black African 🗆 White and Asian 🗆 Prefer not to say 🗆 Any other mixed background, please write in:

**Asian/Asian British**

Indian 🗆 Pakistani 🗆 Bangladeshi 🗆 Chinese 🗆 Prefer not to say 🗆

Any other Asian background, please write in:

**Black/ African/ Caribbean/ Black British**

African 🗆 Caribbean 🗆 Prefer not to say 🗆

Any other Black/African/Caribbean background, please write in:

**Other ethnic group**

Arab 🗆 Prefer not to say 🗆 Any other ethnic group, please write in:

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

Yes 🗆 No 🗆 Prefer not to say 🗆

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the H.R. Manager, if you are a job applicant.

**What is your sexual orientation?**

Heterosexual 🗆 Gay woman/lesbian 🗆 Gay man 🗆 Bisexual 🗆

Prefer not to say 🗆 If other, please write in:

**What is your religion or belief?**

No religion or belief 🗆 Buddhist 🗆 Christian 🗆 Hindu 🗆 Jewish 🗆

Muslim 🗆 Sikh 🗆 Prefer not to say 🗆 If other religion or belief, please write in:

**Do you have caring responsibilities? If yes, please tick all that apply**

None 🗆 Primary carer of a child/children (under 18) 🗆

Primary carer of disabled child/children 🗆

Primary carer of disabled adult (18 and over) 🗆 Primary carer of older person 🗆

Secondary carer (another person carries out the main caring role) 🗆

Prefer not to say 🗆