You don’t have to answer the following questions if you don’t want to, the information provided is entirely voluntary. The information is held to comply with our legal obligations under the Equality Act (2010).

**1. Gender Identity 2. Age**

|  |  |  |
| --- | --- | --- |
| **☐ Female**  **☐ Male**  **☐ In another way**  **☐ Prefer not to say** |  | **Please, let us know your date of birth:** |

**3. Ethnic Group & Nationality**

|  |
| --- |
| Please choose one category only  ☐African – African Scottish or African British  ☐African other  ☐Asian – Bangladeshi, Bangladeshi Scottish or Bangladeshi British  ☐Asian – Chinese, Chinese Scottish or Chinese British  ☐Asian – Indian, Indian Scottish or Indian British  ☐Asian Other  ☐Asian – Pakistani, Pakistani Scottish or Pakistani British  ☐Caribbean or Black – Black, Black Scottish or Black British  ☐Caribbean or Black – Caribbean, Caribbean Scottish or Caribbean British  ☐Caribbean or Black - Other  ☐Mixed or multiple ethnic group  ☐Other Ethnic Group – Arab, Arab Scottish or Arab British  ☐Other Ethnic Group - other  ☐Prefer not to say  ☐White - Gypsy Traveller  ☐White - Irish  ☐White – Other  ☐White other British  ☐White - Polish  ☐White - Scottish |

**4. Religion and Belief**

**Which of the following religions, religious denomination or bodies do you belong to?**

☐None

☐Church of Scotland

☐Roman Catholic

☐Other Christian

☐Muslim

☐Buddhist

☐Sikh

☐Jewish

☐Hindu

☐Other (Please specify)

☐I prefer not to answer this question

**5. Sexual Orientation**

**How would you describe your sexual orientation?**

☐ Heterosexual / Straight

☐Gay/Lesbian

☐Bisexual

☐In another way

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

☐I prefer not to answer this question

**6. Disability**

**Do you consider that you have a disability according to the terms of the Equality Act 2010?**

☐Yes

☐ No

☐I prefer not to answer this question

**Please indicate the type of condition that applies to you?**

☐Blindness or partial sight loss

☐Deafness or partial hearing loss

☐Learning difficulty e.g. dyslexia or dyspraxia

☐Learning difficulty e.g. Downs Syndrome

☐Long term chronic or progressive illness e.g. cancer, diabetes or epilepsy

☐Mental Health Condition e.g. depression or schizophrenia

☐Other

☐Physical disability

☐prefer not to answer this question

**7. Disability**

We want to ensure that disabled people are able to compete during the recruitment and selection process on equal terms. We will therefore make any reasonable adjustments necessary to this process to make this possible. This might involve, for example, providing a candidate with modified equipment or practical assistance at an interview. It might also involve taking account of any feature of your disability that may affect your performance to ensure that you are not disadvantaged. To ensure that reasonable adjustments can be made, we would be grateful if you could complete the following questions:

**1. Please tell us what impact (if any) your disability may have on you during the assessment and/or interview process and any adjustments that you require to the process.**