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| **EQUAL OPPORTUNITIES QUESTIONNAIRE**  **Private and Confidential** | 1 |

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| Camden Carers wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity. The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary. The information provided will be kept confidential and will be used for monitoring purposes.  If you have any questions about the form please email humanresources@camdencarers.org.uk |

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| **1. Ethnic group** | |
| **WHITE**  British or Mixed British  English  Irish  Welsh  Any other  (specify if you wish) | **ASIAN**  Bangladeshi  Indian  Pakistani  Any other Asian background  (specify if you wish) |
| **BLACK**  African  Caribbean  Any other Black background  (specify if you wish) | **CHINESE**  Any Chinese background  (Specify if you wish) |
| **ANY OTHER ETHNIC BACKGROUND**  Any other ethnic background  (specify if you wish)  I prefer not to disclose this information | **MIXED ETHNIC BACKGROUND**  Asian and White  Black African and White  Black Caribbean and White  Any other Mixed ethnic background  (specify if you wish) |

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| **2. Disability**  The Disability Discrimination Act 1995 defines disability as 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 consider yourself to have a disability?  Yes  No  I prefer not to disclose this information |

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| **3. Age**  What is your age (in years)?  I prefer not to disclose this information |

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| **4. Religion**  Which religion, religious denomination or body do you currently belong to?  No religion or belief Buddhist  Christian       Hindu  Jewish Muslim Sikh  Prefer not to say  If other religion or belief, please write in:   |  | | --- | |  | |

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| **5. Gender Identity**  How would you describe your gender?  Female Male Transgender Non Binary  I prefer not to disclose this information  If you prefer to use a different gender identity, please write here:   |  | | --- | |  | |

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| **6. Sexual Orientation**  How would you describe your sexual orientation?  Heterosexual  Lesbian  Gay  Bisexual  If you identify as another sexual orientation, please write here:   |  | | --- | |  |   I prefer not to disclose this information |
| **7. Caring responsibility**  **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 \* |





Camden Carers is funded by London Borough of Camden and NHS Camden.   
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