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**Equal Opportunities and Diversity Monitoring Form**

Thank you for applying to be a HCPC Council Apprentice. The purpose of this form is to help us monitor and improve our standards of recruitment and employment practice.

The HCPC is committed to equal opportunities and reflecting the diversity of the public and our registrants. To monitor our appointment process we collect diversity data on all applications, which is stored separately from the rest of your application and is not seen by any shortlisting or interview panel. It is used to produce statistics so that we can analyse the diversity profile of those applying to the HCPC and meet the obligations of our equality, diversity and inclusion policy.

It should take no more than 5 minutes to complete this form.

All information we collect will be treated confidentially in accordance with the UK General Data Protection Regulation (UK GDPR), the Data Protection Act 2018 and our data protection policy.

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| **Date of Birth (dd/mm/yyyy)** | Prefer not to disclose |

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| **What is your sex?** | Male   Female  Intersex  Prefer not to say |
| **Is the gender you identify with the same as your sex registered at birth?** | Yes  No  Prefer not to say  Prefer to self-describe |
|  | **If ‘Prefer to self-describe’ gender identity, please describe here**: |

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| **What is your legal marital or registered civil partnership status?** |
| Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated but still legally married  Separated but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a registered civil partnership  Prefer not to say |

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| **Please indicate your parental or caring responsibilities:** |
| Primary carer of a child or children (under 18)  Joint primary carer of a child or children (under 18)  Primary carer of a disabled child or children  Joint primary carer of a disabled child or children  Primary carer or assistant for a disabled adult (18 years or over)  Joint primary carer or assistant for a disabled adult (18 years or over)  Primary carer or assistant for an older person or people (65 and over)  Joint primary carer or assistant for an older person or people (65 and over)  Secondary carer (another person carries out the main caring role)  No caring responsibilities  Prefer not to specify |

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| **Please select the option which best describes your sexual orientation:** |
| Heterosexual/straight  Gay man  Gay woman/lesbian  Bisexual  Asexual  Pansexual  Queer  Prefer not to say  Prefer to self-describe |
| **If ‘Prefer to self-describe’ sexual orientation, please describe here:** |

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| **Please indicate which of the following best describes your ethnic origin:** |
| White  Mixed or multiple ethnic groups  Asian or Asian British  Black, African, Caribbean or Black British  Other ethnic group  Prefer not to say  **Which of the following best describes your 'White' background?**  English, Welsh, Scottish, Northern Irish or British  Irish  Gypsy or Irish Traveller  Roma  Any other White background  Prefer not to say  **Which of the following best describes your ‘Mixed or Multiple ethnic groups’ background?**  White and Black Caribbean  White and Black African  White and Asian  Any other Mixed or Multiple ethnic background  Prefer not to say  **Which of the following best describes your 'Asian or Asian British' background?**  Indian  Pakistani  Bangladeshi  Chinese  Any other Asian background  Prefer not to say  **Which of the following best describes your 'Black, African, Caribbean or Black British' background?**  African  Caribbean  Any other Black, African or Caribbean background  Prefer not to say  **Which of the following best describes your ‘Other ethnic group’ background?**  Arab  Other  Prefer not to say |
| **If ‘Any other White background’, ‘Any other Mixed or Multiple ethnic background’, ‘Any other Asian background’, ‘Any other Black, African or Caribbean background’ or ‘Other’ please describe here:** |

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| **Please indicate your religion or strongly held belief, if any:** |
| No religion or strongly held belief  Buddhist  Christian (including Church of England, Catholic, Protestant and all other Christian denominations)  Hindu  Jewish  Muslim  Sikh  Spiritual  Any other religion or belief  Prefer not to say |
| **If ‘Any other religion or belief’, please describe here:** |

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| **Do you consider yourself to have a disability or to be a disabled person?** | Yes  No  Prefer not to say |
| **Do you have any of the following disabilities, long-term conditions or impairments? Select all that apply:** | |
| Dyslexia, dyscalculia, dyspraxia  Neurodiverse (e.g. autism, ADHD, etc.)  Hearing, speech, or visual impairment  Long-term/chronic physical health condition  Mental health condition  Mobility or musculoskeletal issue  Prefer not to say  I do not have a disability, long-term condition or impairment  I have a disability, condition or impairment not listed above | |
| **If you have a disability, condition or impairment not listed above, please describe here:** | |

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| **Do you consider yourself to fall under the protected characteristics of ‘pregnancy and maternity’?** | Yes  No  Prefer not to say |

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| **Please indicate the type of school you attended for the majority of your time between the ages of 11-16:** |
| A state-run or state-funded school in the UK - Non-selective  A state-run or state-funded school outside the UK - Non-selective  A state-run or state-funded school in the UK - Selective on academic, faith or other ground  A state-run or state-funded school outside the UK - Selective on academic, faith or other ground  Home educated  Independent or fee-paying school in the UK  Independent or fee-paying school outside the UK  I don’t know  Prefer not to say |

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| **Please indicate whether when you were 18 any of your parents or guardians had completed a university degree course or equivalent (e.g., BA, BSc or higher)?** |
| Yes  No  I don’t know  Prefer not to say |

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| **Please indicate the country in which you are based:** |
| England  Wales  Scotland  Northern Ireland  Prefer not to say  Other |
| **If ‘Other’, please specify here:** |