

**Equal Opportunities Monitoring Form**

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| **Applications for Mini-Pupillage**  We aim to treat all applicants fairly; irrespective of race, religion, gender, sexual orientation, marital status, disability and age.  In order to monitor our success as an equal opportunities employer, we ask that all applicants provide the information below and overleaf. Please note that completion of this form is entirely optional and that omission to do so will have no effect on your application.  This information will only be used for the purposes of equality monitoring and statistical analysis. It will be treated in the strictest confidence, anonymised upon receipt, and will not be seen by the barrister(s) and/or employee(s) responsible for assessing your application. |

**Age**

|  |  |  |
| --- | --- | --- |
| 1 | 16-24 |  |
| 2 | 25-34 |  |
| 3 | 35-44 |  |
| 4 | 45-54 |  |
| 5 | 55-64 |  |
| 6 | 65 + |  |
| 7 | Prefer Not to Say |  |

**Gender**

|  |  |  |
| --- | --- | --- |
| 1 | Male |  |
| 2 | Female |  |
| 3 | Prefer Not to Say |  |
| 4 | Prefer to Self-describe (*please use the comment box to outline your self-description*) |  |

Is your gender identity the same as the sex you were assigned at birth?

|  |  |  |
| --- | --- | --- |
| 1 | Yes |  |
| 2 | No |  |
| 3 | Prefer Not to Say |  |

**Disability**

Do you consider yourself to have a disability?

|  |  |  |
| --- | --- | --- |
| 1 | Yes |  |
| 2 | No |  |
| 3 | Prefer Not to Say |  |

Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

|  |  |  |
| --- | --- | --- |
| 1 | Yes: Limited a Lot |  |
| 2 | Yes: Limited a Little |  |
| 3 | No |  |
| 4 | Prefer Not to Say |  |

**Ethnic Group**

|  |  |  |  |
| --- | --- | --- | --- |
| 1 | White | British |  |
| 2 | Irish |  |
| 3 | Gypsy or Irish Traveller |  |
| 4 | Other White Background |  |
| 5 | Mixed | White and Black Caribbean |  |
| 6 | White and Black African |  |
| 7 | White and Asian |  |
| 8 | White and Chinese |  |
| 9 | Other Mixed Background |  |
| 10 | Asian or Asian British | Indian |  |
| 11 | Pakistani |  |
| 12 | Chinese |  |
| 13 | Bangladeshi |  |
| 14 | Other Asian Background |  |
| 15 | Black or Black Caribbean | Caribbean |  |
| 16 | African |  |
| 17 | Other Black Background |  |
| 18 | Arab or Other Ethnicity | Arab |  |
| 19 | Other Ethnic Group |  |
| 20 | Prefer Not to Say | |  |

**Religion or Belief**

|  |  |  |
| --- | --- | --- |
| 1 | Buddhist |  |
| 2 | Christian |  |
| 3 | Hindu |  |
| 4 | Jewish |  |
| 5 | Muslim |  |
| 6 | Sikh |  |
| 7 | Any Other Religion |  |
| 8 | No Religion or Belief |  |
| 9 | Prefer Not to Say |  |
| 10 | Prefer to Self-describe (*please use the comment box to outline your self-description*) |  |

**Sexual Orientation**

|  |  |  |
| --- | --- | --- |
| 1 | Bisexual |  |
| 2 | Gay Man |  |
| 3 | Gay Woman/Lesbian |  |
| 4 | Heterosexual/Straight |  |
| 5 | Other |  |
| 6 | Prefer Not to Say |  |
| 7 | Prefer to Self-describe (*please use the comment box to outline your self-description*) |  |

**Marital Status**

|  |  |  |
| --- | --- | --- |
| 1 | Single |  |
| 2 | Married |  |
| 3 | Civil Partner |  |
| 4 | Living with Partner |  |
| 5 | Separated/Divorced |  |
| 6 | Widowed |  |
| 7 | Prefer Not to Say |  |
| 8 | Prefer to Self-describe (*please use the comment box to outline your self-description*) |  |

**Socio-Economic Background**

If you went to University (to study a BA, BSc course or higher), were you part of the first generation of your family to do so?

|  |  |  |
| --- | --- | --- |
| 1 | Yes |  |
| 2 | No |  |
| 3 | Did Not Attend University |  |
| 4 | Prefer Not to Say |  |

Did you mainly attend a state or fee-paying school between the ages of 11 – 18?

|  |  |  |
| --- | --- | --- |
| 1 | UK State School |  |
| 2 | UK Independent/Fee-Paying School |  |
| 3 | Attended School Outside of the UK |  |
| 4 | Prefer Not to Say |  |

**Caring Responsibilities**

Are you a primary carer for a child or children under 18?

|  |  |  |
| --- | --- | --- |
| 1 | Yes |  |
| 2 | No |  |
| 3 | Prefer Not to Say |  |

Do you look after, or give any help or support to family members, friends, neighbors or others because of either:

* Long-term physical or mental ill-health/disability; or
* Problems related to old age

(Do not count anything you do as part of your paid employment)

|  |  |  |
| --- | --- | --- |
| 1 | Yes: 1-19 Hours a Week |  |
| 2 | Yes: 20-49 Hours a Week |  |
| 3 | Yes: More Than 50 Hours a Week |  |
| 4 | No |  |
| 5 | Prefer Not to Say |  |