

Equal Opportunities & Diversity Questionnaire

The Carroll Centre aims to ensure that no employee or prospective employee is subject to any form of discrimination or harassment on grounds including sex, marital status, race, religion, belief, colour, ethnic origin, disability, age, sexual orientation, language.

In order to ensure that our practices comply with good equal opportunities, we would be grateful if you would complete and return the questionnaire below to enable us to assess our performance. The information will be detached from your application form and will be treated in the strictest of confidence.

Post applied for	Vacancy Ref	Closing Date
Region/Country	Location	

Please tick the box that is appropriate to you:

Sex: Male Female: If you are undergoing gender reassignment, please tick the box which applies to your future gender

Sexual Orientation

Prefer not to state Heterosexual Gay Lesbian Bisexual

Other* *Please state.....

How would you describe your Marital Status?

Prefer not to state Single Married Civil Partnered Divorced Widowed

Other* *Please state.....

Age:

16-25 26-35 36-45 46-60 61+

Do you consider that you have a disability? Yes No Please give details.....

Ethnic breakdown: What is your ethnic group?

Prefer not to state Asian Bangladeshi Asian Indian Asian Pakistani Asian Other*

Black African Black Caribbean Black Other*

White English White Irish White Northern Irish White Welsh White Scottish White Other*

Mixed Parentage White & Black African White & Black Caribbean White & Asian

Any other mixed background* Other ethnic group* *If other please state.....

Religion/Faith: How would you describe your religion/beliefs?

Prefer not to state Agnostic Atheist Baha'i Buddhist Catholic Christian Hindu

Jehovah's Witness Jewish Muslim/Islam Protestant/C of E Sikh Other*

*Please state.....

Preferred language:

If you can speak more than one language please place a number next to the box in order of fluency/preference (1 being your most fluent or preferred language)

English Arabic Bengali Deaf Loop Deaf Sign Deaf Written French German Hindi

Italian Japanese Javanese Korean Mandarin Marathi Polish Portuguese Punjabi

Russian Spanish Tamil Telugu Urdu Vietnamese Welsh Other*

*Please state.....