**Trustee Equal Opportunities and Diversity Monitoring Form**

***The information disclosed on this form will be used for equal opportunities and diversity monitoring purposes only. The information provided will be securely held on our database and treated in line with the principles outlined in data protection law.***

***If you do not wish to complete any sections of this form please feel free to leave them blank. Please return the completed form to*** ***companysecretary@firefighterscharity.org.uk*** ***or***

*Vicki Fox*

*PA to the Executive Team*

*The Fire Fighters Charity*

*Belvedere House*

*Basing View*

*Basingstoke*

*RG21 4HG*

*The Charity provides you with the following assurances:*

* *The information provided on this form does not provide any basis of selection for recruitment to Trustee positions.*
* *The information provided on this form is for Equal Opportunities and Diversity Monitoring Purposes only and will be used solely for statistical analysis.*
* *All information on this form will be held securely on our database is regarded as strictly confidential.*

Mr / Mrs / Miss / Ms / Other ………..……… Surname ………………………………….….…….

First name ……………………...…………… Other name(s) ……………………………….…….

Date of Birth ………………………………… Fire and Rescue Service………………...............

Where did you see the role advertised? .....................................................................................

**Beneficiary Status:** Service Personnel [ ]  Former Service Personnel [ ]  Works Firefighter [ ]

***(if applicable)***

Former Works Firefighter [ ]  Fire Fighters Charity Employee [ ]  Former Fire Fighters Charity Employee [ ]

**Gender:** Female [ ]  Male [ ]  Transgender [ ]  Prefer not to disclose [ ]

**Nationality:** e.g. British citizen, Portuguese citizen etc

……………………………………………………………………………………………………………

**Religion or Belief:** Please tell us your religion or belief

…………………………………………………………………………….……………………………..

Prefer not to disclose religion or belief [ ]

**Sexuality:** Please select the option which best describes your sexuality:

Heterosexual [ ]  Bisexual [ ]

Lesbian / Gay [ ]  Prefer not to disclose [ ]

**Ethnic Origin:** Please tick the box that best describes your ethnic origin:

|  |  |  |
| --- | --- | --- |
| **ASIAN OR ASIAN BRITISH** | **MIXED** | **WHITE** |
| BangladeshiIndianPakistaniAny other Asian origin | [ ] [ ] [ ] [ ]  | Asian & WhiteBlack African & WhiteBlack Caribbean & WhiteAny other Mixed origin | [ ] [ ] [ ] [ ]  | BritishIrishAny other White origin | [ ] [ ] [ ]  |
| **BLACK** | **OTHER ETHNIC GROUP** |  |
| AfricanCaribbeanAny other Black origin | [ ] [ ] [ ]  | ChineseOther | [ ] [ ]  | Prefer not to disclose | [ ]  |

**Disability:**

**The Equality Act 2010**

The Equality Act 2010 defines a person as disabled if they have a physical or mental impairment which has a substantial and long term (i.e. has lasted or is expected to last at least 12 months) adverse effect on one’s ability to carry out normal day-to-day activities.

This definition includes conditions such as diabetes, cancer, HIV, mental health illness and learning disabilities.

Do you consider yourself to have a disability according to the above definition?

Yes [ ]  No [ ]  Prefer not to disclose [ ]

If yes, please describe your disability ……………………………………………………………….

…………………………………………………………..……………………………………………….

**Data Protection Act:**

The Charity is required by law to obtain your consent to such data being recorded. Any information on this form will be treated with the strictest of confidence and held on our secure database only.

I give my consent to sensitive personal data being recorded and stored.

Signed …………………………………………………...……….…… Date ………………….…...