# **Equality and Diversity Monitoring Form**

We are committed to ensuring the people participating in our programme reflect the diverse communities located within Northfleet and Estuary region. To do this we need your help in filling out this short monitoring form.

Filling out this form is voluntary. You can select "prefer not to answer" if you would rather not answer any of the questions.

The information provided will be kept confidential and will only be used for monitoring purposes.

If you have any questions about the form contact [info@creativeestuary.com](mailto:info@creativeestuary.com)

## Sex and Gender

What is your legal sex?

Female  Male  Prefer not to answer 

Is the gender you identify with the same as your sex registered at birth?

Yes  No  Prefer not to answer 

If the gender you identify with is not the same as your sex registered at birth, please write in:

## Age

Please select the age group are you currently in:

16-24  25-29  30-34  35-39  40-44 

45-49  50-54  55-59  60-64  65+ 

Prefer not to answer 

## Disability and Health

Do you consider yourself to have a disability or health condition?

Yes  No  Prefer not to answer 

## Ethnicity

Please choose one of the following options that most accurately describes your ethnic group or background. These categories have been adapted from the Governments list of ethnic groups.

|  |  |
| --- | --- |
|  Arab   Asian/Asian British: Bangladeshi   Asian/Asian British: British   Asian/Asian British: Chinese   Asian/Asian British: Indian   Asian/Asian British: Pakistani   Black/Black British: African   Black/Black British: British   Black/Black British: Caribbean |  Mixed: White and Asian   Mixed: White and Black African   Mixed: White and Black British   Mixed: White and Black Caribbean   Mixed: White and Arab   White: British (English, Northern Irish, Scottish, Welsh)   White: Irish   White: Gypsy or Irish Traveller |
|  Prefer not to answer this question |  Any other ethnic group or background. Please describe in your own words: |

Sexual Orientation

What is your sexual orientation?

Heterosexual  Gay  Lesbian  Bisexual  Asexual  Pansexual  Undecided  Prefer not to say 

If you prefer to use your own identity, please write in