**The YMCA is an Equal Opportunity Employer. We are committed to the active promotion of equal opportunity, both in the provision of services and as an employer of paid and unpaid workers.**

To help us monitor our equal opportunity policy in recruitment and selection procedures, you are requested to complete the following questionnaire. The information you provide does not form part of the selection procedure, it is used only for monitoring purposes. This sheet will be separated from your application form before shortlisting.

**Post applied for: …..…………………………………………………………………………………**

Please tick the appropriate box

**Gender** Male Female

**Age Range**

 up to 25 26-35 36-45 46-55 56 and over

**Marital Status:** …………………………………………………………………………………………

**Number of Dependants (if any) including those you have care responsibilities for:**

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

**Do you have any additional support needs to enable you to attend an interview and/or if appointed? If so, please give details:** Yes / No

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

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

**Where did you see this vacancy advertised** …………………………………………………….

**1. What is your ethnic group?**

**Please choose ONE section from A to E, and then tick the appropriate box to**

**indicate your background.**

**A. White**

British English

Scottish Welsh

Irish

Any other White background, please write in …………………………………..

**B. Mixed**

White and Black Caribbean White Black African

White and Asian

Any other Mixed background, please write in ….………………………………..

**C. Asian, Asian British, Asian English, Asian Scottish, Asian Welsh or Asian**

**Irish**

Indian Pakistani

Bangladeshi

Any other Asian background, please write in ……………………………………..

**D. Black, Black British, Black English, Black Scottish, Black Welsh or Black**

**Irish**

Caribbean African

Any other Black background, please write in ….………………………………..

**E. Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or Chinese Irish**

Caribbean African

Any other Black background, please write in ….………………………………..

**2. What is your religion or belief?**

Christian Buddhist Hindu Jewish

Muslim Sikh None Prefer not

 To say

Other please write in ……………………………………..

I understand that this information may be stored and processed as part of the Fylde Coast YMCA’s monitoring of equal opportunities as part of the recruitment procedure and give my consent for my details to be used for this purpose.

Signature: …………………………………………… Date: ………………………

Print Name: ………………………………………… Date: ……………………..