Capital Theatres is committed to providing equal opportunities to all members of staff and job applicants and will not discriminate either directly or indirectly on the grounds of age, disability, sex, gender reassignment, pregnancy, maternity, race (including colour, nationality and ethnic or national origin), sexual orientation, religion or belief, or because someone is married or in a civil partnership.

To ensure that this recruitment complies with our policy please complete all shaded areas of the application form using black ink, written clearly or typed. All information gathered will be treated in the strictest confidence. **This monitoring form does not form part of your application and will therefore be detached from it on receipt and stored separately.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full name |  | | | | | | | |
| Position applied for |  | | | | | | | |
| Are you already employed by Capital Theatres √ | | | | Yes | |  | No |  |
| Gender √ | Male |  | Female |  | Prefer not to say | | |  |
| Do you identify as  transgender/transsexual √ | Yes |  | No |  | Prefer not to say | | |  |
| Your date of birth | | |  | | | | | |

Your age – please tick one ü

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 16-18 |  | 21-30 |  | 41-50 |  | 61-70 |  |
| 18-20 |  | 31-40 |  | 51-60 |  | 70+ |  |

Disability

|  |  |
| --- | --- |
| Do you consider yourself to have a disability? If yes please describe. | yes/no |
| Do you require any adjustments to be made to assist you at interview? If yes please describe | yes/no |

Your ethnic origin – please tick one ü

WHITE BLACK ASIAN OTHER

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Scottish |  | Scottish |  | Scottish |  | Mixed |  |
| English |  | English |  | English |  | Other |  |
| Welsh |  | Welsh |  | Welsh |  |  |  |
| Irish |  | Irish |  | Irish |  |  |  |
| Other |  | African |  | Bangladeshi |  |  |  |
|  |  | Caribbean |  | Chinese |  |  |  |
|  |  |  |  | Indian |  |  |  |
|  |  |  |  | Pakistani |  | Rather not say |  |

Other ethnic origin - please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Religion or belief

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Buddhist |  | Jewish |  | Roman Catholic |  | Church of Scot |  |
| Muslim |  | Hindu |  | Sikh |  | Other Christian |  |
| Other |  | None |  | Rather not say |  |  |  |

Sexual Orientation

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Bisexual |  | Heterosexual |  | Gay | |  | Lesbian | |  | |
| Rather not say |  |  |  | |  | |  |  | |  |

For the purposes of compliance with the Data Protection Act I hereby confirm that by completing this form I give my consent to the Trust processing the data supplied for the purposes of equal opportunities monitoring.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date |  |

*for electronic submissions - typing your name here will constitute agreement*