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**Atal y Fro**

**Equal Opportunities Form**

We request that all staff, volunteers, job applicants, and trustees complete this form.

All forms are anonymous and confidential. We collate this information periodically to enable our performance in line with the equality and diversity of the communities we work in. Anonymised information is viewed by our funders, our Board of Trustees, and organisations that measure the quality of our organisation including Welsh Women’s Aid, PQASSO, and Investors in People.

Please tick the boxes that apply to you.

**Are you**

A member of staff [ ]  A volunteer [ ]

A Trustee [ ]  A new job applicant [ ]

**What is your gender?**

Female (including transgender female) [ ]  Male (including transgender male) [ ]

Not birth gender / undergoing transition [ ]  Gender – other identity [ ]

Prefer not to say [ ]

**What is your age group?**

15 and under [ ]  16 to 17 [ ]  18 to 25 [ ]  26 to 35 [ ]

36 to 45 [ ]  46 to 55 [ ]  56 to 65 [ ]  65 and over [ ]

Prefer not to say [ ]

**What is your ethnicity?**

*White*

British [ ]  Irish [ ]  Other White [ ]

*Mixed*

White/Black Caribbean [ ]  White/Black African [ ]

White/Asian [ ]  Other Mixed [ ]

*Asian or Asian British*

Indian [ ]  Pakistani [ ]  Bangladeshi [ ]  Chinese [ ]  Other Asian [ ]

*Black or Black British*

Black Caribbean [ ]  Black African [ ]  Other Black [ ]

*Other*

Other Ethnic Group [ ]  Prefer not to say [ ]

**What is your religion?**

Christian [ ]  Muslim [ ]  Hindu [ ]  Jewish [ ]

Sikh [ ]  Buddhist [ ]  Atheist [ ]  Other [ ]

None [ ]  Prefer not to say [ ]

**What is your sexuality?**

Heterosexual [ ]  Gay woman [ ]  Gay man [ ]  Bi-sexual [ ]

Asexual [ ]  Other [ ]  Prefer not to say [ ]

**What is your marital status?**

Single [ ]  Married [ ]  Separated [ ]  Divorced [ ]

Civil Partnership [ ]  Co-habiting [ ]  In relationship [ ]

Prefer not to say [ ]

**Do you have any dependents?**

Yes – Children [ ]  Yes – Adults [ ]  No [ ]

Prefer not to say [ ]

**Are you pregnant?**

Yes [ ]  No [ ]  Prefer not to say [ ]

**Are you on maternity leave, paternity leave, co-parenting leave, or adoptive leave?**

Yes [ ]  No [ ]  Prefer not to say [ ]

**Do you consider yourself to have a disability?**

Yes [ ]  No [ ]  Prefer not to say [ ]

**Are you a Welsh speaker?**

Yes [ ]  No [ ]  Prefer not to say [ ]

Thank you for taking the time to complete the form