

## EQUAL OPPORTUNITIES MONITORING FORM

Newbridge Memo is an Equal Opportunity Employer. All employees will receive equal treatment regardless of age, race, class, gender, disability or sexuality. Our grant funders require us to return regular statistics on our staff, artists, participants and audiences. We would be very grateful for your help in filling this form in and returning it to us with your contract.

If you would prefer not to answer any of the questions below, please write '*prefer not to say*' in the box. All information you provide will be held confidentially.

Age (please tick)		
16-24	40-44	60-64
25-29	45-49	65+
30-34	50-54	Prefer not to say
35-39	55-59	

Nationality
Please let us know your nationality or if you'd prefer not to say:

Gender
Please let us know how you identify your gender (feel free to include your pronouns) or if you'd prefer not to say:

Ethnicity
Please let us know how you describe your ethnicity or if you'd prefer not to say:

### **Sexual Orientation:**

Please let us know how you describe your sexual orientation or if you'd prefer not to say:

### **Disability & long-term health**

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

If yes, could you please give details about what adjustments you will need during the selection process:

### **Religion**

What is your religion or belief or if you'd prefer not to say:

### **Caring Responsibilities**

Do you have caring responsibilities? Tick all that apply

None ☐

Primary carer of a child/children (under 18) ☐

Primary carer of disabled child/children ☐

Primary carer of disabled adult (18 and over) ☐

Primary carer of older person ☐

Secondary carer (another person carries out the main caring role) ☐

Prefer not to say ☐