

Equal Opportunities Monitoring Form

Ref: E310

Please answer the questions below by completing or ticking the appropriate box.

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------------------------------------------------------------------------------------------|-------------------|
| Age: | Date of Birth: | | Prefer not to say |
| Sex/Gender (this refers to your legal sex) | Male | Female | Prefer not to say |
| Disability Disability is defined as a physical or mental impairment, and the impairment has a substantial (i.e. more than minor or trivial) and long-term adverse effect on your ability to carry out normal day-to-day activities | | | |
| Do you have a disability or a long term medical condition that has lasted for at least 12 months, or is likely to last for at least 12 months, or is likely to last for the rest of your life? | Yes | No known disability | Prefer not to say |
| If yes, what is your disability? (indicate below) | Prefer not to say | | |
| Blind or serious impairment uncorrected by glasses | | Deaf or serious hearing impairment | |
| Two or more impairments and/or disabling medical conditions | | Long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy | |
| General Learning disability (such as Down's syndrome) | | Mental health condition, such as depression, schizophrenia or anxiety disorder | |
| Social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder | | Physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches | |
| A disability, impairment or medical condition not listed above | | A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D | |
| Ethnicity - this question is not about nationality, place of birth, or citizenship, it is about colour and ethnic group. | | | |
| What is your ethnicity? | | | |
| White | | Other Asian background | |
| Gypsy or Traveller | | Mixed - White and Black Caribbean | |
| Black or Black British - Caribbean | | Mixed - White and Black African | |
| Black or Black British - African | | Mixed - White and Asian | |
| Other Black background | | Any other mixed background | |
| Asian or Asian British - Indian | | Arab | |
| Asian or Asian British - Pakistani | | Other ethnic background | |
| Asian or Asian British - Bangladeshi | | Not known | |
| Chinese | | Prefer not to say | |
| Sexual Orientation - What is your sexual orientation? | | | |
| Bisexual | | Gay woman / Lesbian | |
| Heterosexual | | Other | |
| Gay man | | Prefer not to say | |
| Religion or Belief (including lack of belief) - What is your religion? | | | |
| Atheism | | Judaism | |
| Buddhism | | Sikhism | |
| Christianity | | Spiritualism | |
| Hinduism | | Any other religion or belief | |
| Islam | | No religion | |
| Jainism | | Prefer not to say | |
| Marriage and Civil Partnership - Are you married or in a civil partnership? | | | |
| | Yes | No | Prefer not to say |
| Nationality - What is your nationality? | | | |
| | Prefer not to say | | |

Please see overleaf for information on why we request this data and how to return the form to us

Equal Opportunities Monitoring Information

Higher education institutions have a legal duty to collect, analyse and publish equal opportunity data about characteristics that are protected against discrimination under the Equality Act 2012, such as age, race, and disability. Somerville is keen to comply with this legal duty so that it is able to measure the effectiveness of its equality policies, and to ensure that those who work and study at Somerville are treated equally and discrimination involving the 'protected characteristics' is avoided.

Therefore we need you to provide the College with your personal equal opportunities data by completing and returning this form to the Human Resources team. Any information you provide will be presented in an anonymous format and any data that has the potential to identify you as an individual will not be published. The information collected through this form will be held on the Human Resources database and will be accessible only by the Human Resources staff. Data you supply will be kept strictly confidential and according to the Data Protection Act 1998.

Code: The code used at the top of this form is a unique number and identifies the person who has completed this form only to the Human Resources Manager and Human Resources Administrator.

Somerville's equality policy and reports can be found on www.some.ox.ac.uk/equality

Please return one copy of this form to the Human Resources Manager

By hard copy to: Somerville College, Woodstock Road, Oxford. OX2 6HD

Or by email to: human.resources@some.ox.ac.uk

Thank you.