|  |  |
| --- | --- |
| **C:\Users\natalie.woods\Documents\Logos\2015 logos\New SB logo high res.jpg** | **MONITORING FORM – CHIEF EXECUTIVE OFFICER VACANCY**Please complete this form by answering the questions below. This information will assist us in monitoring service users in a confidential manner. This will enable us to gather useful information, target our services effectively, and meet the needs of our service users.  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Date |       |

**1) What is your gender?**

|  |  |  |
| --- | --- | --- |
| Male |[ ]  Female |[ ]  Genderqueer |[ ]
| Non-Binary |[ ]  Other (please specify) |[ ]        |

**2) Do you identify with the gender you were assigned at birth?**

|  |  |  |
| --- | --- | --- |
| Yes |[ ]  No |[ ]  Not all the time |[ ]

**3) What is your ethnic group?**

|  |  |
| --- | --- |
| White - British |[ ]  Asian or British Asian - Indian  |[ ]
| White - Irish |[ ]  Asian or British Asian - Chinese  |[ ]
| White - Traveler of Irish Heritage  |[ ]   |  |
| White Other (Please specify) |[ ]  Asian or British Asian – Other (Please specify)  |[ ]
|       |       |
| Black or Black British – Caribbean |[ ]  Mixed (Please specify)  |[ ]
| Black or Black British – African |[ ]        |
| Black or Black British – Other (Please specify) |[ ]  Other (Please specify)  |[ ]
|       |       |

**4) What is your sexual identity?**

|  |  |  |
| --- | --- | --- |
| Lesbian |[ ]  Bisexual |[ ]  Queer |[ ]
| Gay |[ ]  Heterosexual |[ ]  Other |[ ]

**5) What is your age?**

|  |
| --- |
|       |

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

|  |  |  |
| --- | --- | --- |
| No |[ ]  Yes (please specify) |[ ]        |

The current definition of disability under the disability discrimination act is: ‘A person has a disability for the purpose of this act if he has a physical or mental impairment which has a substantial and long term adverse effect on his ability to carry out normal day to day activities.’