# Public Appointments – Equal Opportunities Monitoring Form

## (For monitoring purposes only)

The Northern Ireland Civil Service (NICS) is committed to ensuring that eligible persons have equal opportunity for public appointments on the basis of their ability and aptitude for the role. Monitoring is carried out to help us ensure that our processes and procedures promote equality of opportunity as far as possible and therefore your help in completing and returning this monitoring form as part of your application would be appreciated. Please note the information you provide on a voluntary basis in this monitoring form will be detached from the information on the application form, held separately and will not be available to selection panels or to anyone else involved in the selection process. The information will be used for statistical purposes only and analysed independently by staff in the Northern Ireland Statistics and Research Agency (NISRA) in the strictest confidence. Thank you for your co-operation.

1. **National Insurance Number**

Please enter your National Insurance Number below:

1. **Gender**

Please tick one box:

|  |  |
| --- | --- |
|  | Male |
|  | Female |
|  | Other |

1. **Age**

Please give your date of birth:

|  |  |  |
| --- | --- | --- |
| Day | Month | Year |
|  |  |  |

1. **Community Background**

Please indicate your community background by ticking the appropriate box below:

|  |  |
| --- | --- |
|  | I have a Roman Catholic community background |
|  | I have a Protestant community background |
|  | I have neither a Protestant or Roman Catholic community background |

1. **Disability**

The Disability and Discrimination Act (DDA) defines a disability as a *“physical or mental impairment which has substantial and long-term adverse effect on a person’s ability to carry out normal day to day activities”.* The Equality section in the Candidate Information Booklet gives an explanation of this definition. Please read that section and then answer the question below.

Do you consider yourself to have a disability? (Please tick one box below)

|  |  |
| --- | --- |
|  | Yes |
|  | No |

1. **Race**
2. Please tick one box to indicate your race:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | White |  |  | Black African |
|  | Black Caribbean |  |  | Bangladeshi |
|  | Chinese |  |  | Black Other |
|  | Pakistani |  |  | Indian |

1. Are you a member of a Mixed Ethnic Group?

|  |  |
| --- | --- |
|  | Yes |
|  | No |

1. Are you a member of the Irish Travelling Community?

|  |  |
| --- | --- |
|  | Yes |
|  | No |

1. If you are of other ethnic origin, please specify:
2. **Language**

Is English your first language? (Please tick one box below):

|  |  |
| --- | --- |
|  | Yes |
|  | No |

1. **Sexual Orientation**

Please consider the statement below and tick one box:

*My sexual orientation is towards someone:*

|  |  |
| --- | --- |
|  | Of the same sex (this covers gay men and lesbians) |
|  | Of a different sex (this covers heterosexual men and women) |
|  | Of the same sex and of the opposite sex (this covers bisexual men and women) |

1. **Marital status**

Please indicate your marital status by ticking one box below:

|  |  |
| --- | --- |
|  | Single, that is never married or in a civil partnership |
|  | Married |
|  | Separated, but still legally married |
|  | Divorced |
|  | Widowed |
|  | In a civil partnership  |
|  | Separated, but still legally in a civil partnership |
|  | Formerly in a civil partnership which is now legally dissolved |
|  | Surviving partner from a civil partnership |

1. **Dependants**

Please indicate if you have personal responsibility for the care of a child, or children, a person with a disability or a dependent older person, by ticking the appropriate box or boxes below?

|  |  |
| --- | --- |
|  | No Dependants |
|  | Child/Children (under 18) |
|  | Disabled child/children (under 18) |
|  | Disabled adult (18 and over) |
|  | Older person/people (65 and over) |

**ADDITIONAL INFORMATION**

1. Which sector would you consider best reflects your employment history over the course of your career?

|  |  |
| --- | --- |
|  | Private Sector |
|  | Civil Service |
|  | Other Public Sector |
|  | Voluntary Sector |

Other, Please Specify:

1. What is your highest level of educational attainment?

|  |  |
| --- | --- |
|  | No Qualifications |
|  | GCSE/ O-level or equivalent |
|  | A-level or equivalent |
|  | Degree or higher |

#### *Thank you for your co-operation*