## The NewBridge Project

## **Equal Opportunities & Diversity Monitoring Form**

The NewBridge Project seeks to be an inclusive organisation, and we want to ensure that all aspects of our work reflect diversity and support equality of opportunity.

This form helps us to determine the effectiveness of our Equal Opportunities Policy, and Equality and Diversity Action Plan. The information we collect within this form is collated as a set of statistics, which support us to identify areas of under-representation across all aspects of our work, which helps us to develop new policies, strategies, and programmes to improve diversity and inclusivity within our organisation, and the culture sector more broadly.

The information provided in this form is strictly confidential and will be kept separate from your application. Your answers here will not affect your application to any of our opportunities. The form will be separated from your application upon receipt, remain anonymous, and the data will not be considered in shortlisting or determining your suitability for the post.

You are under no obligation to complete the form in full, and if there are questions you would rather not answer, then just tick 'prefer not to say' or skip to the next question.

Most questions provide you with the option to respond to the question in your own words in the first instance, but also provide an option to use a tick box. Please do whichever you feel most comfortable with.

1. Role / opportunity you are applying for (or undertaking) at The NewBridge Project:	
2a. If you live in the UK what is your full postcode:	
2b. If you live outside of the UK, what is your country of residence:	

3. How would you de	scribe your gender (p	please self-describe or use tick
box below):	, , , , , , , , , , , , , , , , , , , ,	
Self-describe		
here:		
If you would prefer to	o use a tick box, pleas	se tick one of the below.
Female		
Male		
Transgender		
Non-binary/Non-confor	rming	
Bigender/Gender fluid		
Prefer not to say		
4. Is your gender ider	ntity the same as the	one assigned to you at birth?
Yes		
No		
Prefer not to say		
5. What sexuality do	you identify with (plea	ase self-describe or use tick box
below):		
Self-describe		
here:		
	o use a tick box, pleas	se tick one of the below.
Asexual		
Bisexual		
Gay man		
Gay woman/Lesbian		
Heterosexual/Straight		
Queer		
Other		
Prefer not to say		
	ange? (please self-de	scribe or use tick box below):
Self-describe here:		
If you would prefer to	a uga a tiak baw blaas	
	o use a tick box, pieas	se tick one of the below.
0-15	o use a tick box, pleas	se tick one of the below.
0-15 16-19	o use a tick box, pleas	se tick one of the below.

35-49	
50-64	
65+	
Prefer not to say	

	7. How would you describe your ethnicity (please self-describe or use tick	
box below):		
*Self-describe		
here:		
If you would prefer	to use a tick box, please tick o	ne of the below that best
describes your ethr	· •	
White	British	
	Irish	
	Gypsy or Irish Traveller	
	Any Other White background*	
Mixed	White and Black Caribbean	
	White and Black African	
	White and Asian	
	Any other Mixed background*	
Asian or Asian	Indian	
British	Pakistani	
	Bangladeshi	
	Chinese	
	South Asian	
	South East Asian	
	East Asian	
	British	
	Any other Asian background*	
Black or Black	African	
British	Caribbean	
	British	
	Any other Black / African /	
	Caribbean background*	
Other	Arab	
	Middle East / North African	
	LatinX	
	Any other ethnic group*	
	Prefer not to say	

8. Religion/Belief	(please self-describe or use tick box below):
Self-describe	
here:	

If you would prefer	to use a tick box, please	tick one of the below
No religion or belief	to doo d tion box, picaco	
Buddhist		
Christian (all denom	inations)	
Hindu	maderio)	
Jewish		
Muslim		
Sikh		
Other		
Prefer not to say		
i lelel flot to say		
9 Do vou consider	yourself to have a disabil	ity impairment learning
	term condition? (please m	, ,
_		comeone who has a physical or
		ng-term adverse effect on their
•		also covers people who have
	h HIV, cancer or multiple sci	
Yes*	Trirv, caricer of manipie ser	0.00.00.
No		
Not sure		
Prefer not to say		
*Oh If was what he	est describes your disabil	ity impairment learning
difference or long-	est describes your disabilitierm condition?	ity, impairment, learning
Self-describe here:		
Sell-describe riere.		
If you would prefer	to use a tick box, please	tick all that apply below:
	ments and/or long-term	
conditions	nonte ana, or long term	
A specific learning d	lifference	
	lyspraxia or AD(H)D)	
Learning disability	yopraxia or rib(ri)b)	
(Such as Downs Syndrome)		
A social/communication impairment		
(Such as an autistic spectrum disorder)		
, , ,		
A long-standing illness or health condition		
(Such as cancer, HIV, diabetes, chronic heart disease, epilepsy, endometriosis)		
	· · · · · · · · · · · · · · · · · · ·	
A mental health con		
	n, anxiety disorder, bipolar	
disorder)	ent or mobility issues	
<sub>l</sub> A physical impairme	nt or mobility issues	

(Such as difficulty using arms, or using	
wheelchair or crutches)	
Deaf or serious hearing impairment	
Blind or a serious visual impairment	
A disability, impairment, learning difference or	
long-term condition not listed above	
Prefer not to say	
10. Over the past 12 months, what has been	vour employment status for
the majority of that time (please tick all that a	•
Employed	
Self-employed	
Intern (paid)	
Apprenticeship	
Volunteer (unpaid)	
Student	
Unemployed	
Prefer not to say	
11. What is your highest qualification (please	mark box below):
No formal qualifications	
Further Education (such as college, AS level,	
A-Level, Diploma, NVQ level 2/3)	
Higher education	
Higher education (Postgraduate / Doctorate)	
Vocational training	
Not applicable	
Prefer not to say	
Other*	
the other places are eiter being	
*If other, please specify here:	
12. If you went to university (to study a BA or	r BSc course or higher) were
you part of the first generation of your family	
does not apply to you (because for example,	-
time), you can indicate this below:	you word in our out and
This does not apply to me	
Yes	
No	
Did not attend University	
Prefer not to say	
•	

Attended school outside UK  State School State School - selective on academic, faith or other grounds Independent or fee-paying school Independent or fee-paying school - with a bursary Don't know Other* Prefer not to say  *If other, please specify here:  14. Please think about the parent or other caregiver who was the highest income earner in your household when you were around 14 years old. What kind of work did they do? If this question does not apply to you (because for example, you were in care at this time), you can indicate this below.  Self-describe here:  If you would prefer to use a tick box, please tick all that apply below: This question does not apply to me  Long-term unemployment e.g. claimed Jobseeker's Allowance or earlier
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Long-term unemployment e.g. claimed Jobseeker's Allowance or earlier
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unemployment benefit for more than a year
Routine manual and service occupations e.g.
van driver, cleaner, porter, waiter/waitress, bar
staff
Semi-routine manual and service occupations
e.g. postal worker, security guard, machine
worker, receptionist, sales assistant
Technical and craft occupations e.g. fitter,
plumber, printer, electrician
Clerical and intermediate occupations e.g.
secretary, nursery nurse, office clerk, call
centre agent
Middle or junior managers e.g. office manager,

nomic status (this could be ease don't feel limited to these
sitive change within our feedback about this form or make that will support inclusivity,
details here
·

Thank you for completing this form.
Please return to admin@thenewbridgeproject.com