

Ware Museum Equality and Diversity Monitoring Form

Ware Museum wants to improve the diversity of its workforce, Trustees and volunteers. An important part of this is building an accurate picture of its workforce and potential workforce. This helps us to understand how we can improve our recruitment processes.

We need your help to do this and would be grateful if you could complete this form and return it with your application. Completing the form is voluntary and it will not have an impact on your application if you choose not to return it. The form will be separated from your application upon receipt and the information recorded will not be considered as part of the shortlisting process.

PLEASE NOTE: the monitoring information collected on this form is strictly confidential and will

be stored securely for 12 months after your application has been received. You can ask us to delete this information at any time by emailing: manager@waremuseum.org.uk Gender Man □ Woman □ Non-binary □ Prefer not to say □ If you prefer to use your own term, please specify: Age 16-24

25-29

30-34

35-39

40-44

45-49

50-54 55-59 \square 60-64 \square 65+ \square Prefer not to say \square What is your ethnicity? Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box. White English □ Welsh □ Scottish □ Northern Irish □ Irish □ British □ Gypsy or Irish Traveller □ Prefer not to say □ Any other white background, please specify: Mixed/multiple ethnic groups

White and Black Caribbean □ White and Black African □ White and Asian □

Prefer not to say ☐ Any other mixed background, please specify ☐

Asian/Asian British

Indian □ Pakistani □ Bangladeshi □ Chinese □ Prefer not to say □
Any other Asian background, please specify:
Black/African/Caribbean/Black British
African □ Caribbean □ Prefer not to say □
Any other Black/African/Caribbean background, please specify:
Other ethnic group
Arab \square Prefer not to say \square Any other ethnic group, please specify:
Do you consider yourself to have a disability or health condition?
Yes □ No □ Prefer not to say □
Thank you for completing this form. Please return it, with your application, to
manager@waremuseum.org.uk

