Belfast YMCA Equal Opportunities Monitoring Form



Confidential				
Reference no (To be filled in by employer only):				
Guidance Notes: We are an Equal Opportunities Employer. We aim to provide equality of opportunity to all persons regardless of their religious belief; gender; race; age; sexual orientation; or, whether they are married or are in a civil partnership; or, whether they are disabled. We do not discriminate against our job applicants or employees on any of the grounds listed above. We aim to select the best person for the job and all recruitment decisions will be made objectively.				
Community Background: Regardless of whether they actually practice a particular religion, most people in Northern Ireland are perceived to be members of either the Protestant or Roman Catholic communities.				
Please indicate the community to which you belong by ticking the appropriate box below:				
I am a member of the Protestant community: □				
I am a member of the Roman Catholic community:				
I am not a member of either the Protestant or the □ Roman Catholic communities:				
If you do not answer the above question, or if you tick the "not a member of either" box, we are encouraged to use the residuary method of making a determination, which means that we can make a determination as to your community background on the basis of the personal information supplied by you in your application form/personnel file.				
Gender: Please specify:				
Note: If you answer these questions about community background and Gender you are obliged to do so truthfully, as it is a criminal offence under the Fair Employment (Monitoring) Regulations (NI) 1999 to knowingly give false answers to these questions.				
Age:				
Please state your date of birth:				
Racial Group:				
Please state your country of birth:				
My country of birth is: Please state your nationality:				

My nationality is; Please indicate which of the following applies to you:				
White		Chinese		
Irish Traveller		Indian		
Pakistani		Bangladeshi	i 🗆	
Black Caribbea	า 🗆	Black Africar	n 🗆	
Black Other				
Mixed ethnic group (please state which):				
Any other ethnic group (please state which):				
Disability:				
Under the <i>Disability Discrimination Act 1995</i> you are deemed to be a disabled person if you have a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.				
Do you consider yourself to have a disability?				
Yes: □	No:			
If you answered "yes", please indicate the nature of your disability:				