

The Money and Mental Health Policy Institute wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary.

The information you provide will stay confidential, and be stored securely and limited to only some staff in the organisation's Human Resources section.

Please return the completed form by email. It will be stored separately and not used as part of the recruitment process.

| Gender | Male • | Female • | Other • | Prefer no | ot to sa | •y ● | |
|---------------|-----------|------------------|------------|-----------|----------|--------------|----------------|
| Are you | u married | or in a civil pa | rtnership? | Yes • | No • | Prefer not | t to say • |
| Age 16 | -24 • | 25-29 • | 30-34 • | 35-39 | • | 40-44 • | 45-49 • |
| 50 | -54 • | 55-59 • | 60-64 • | 65+ | • | Prefer not t | o say • |

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

EnglishWelshScottishNorthern IrishIrishBritishGypsy or Irish TravellerPrefer not to say

Any other white background, please write in:

Mixed/multiple ethnic groups

White and Black Caribbean • White and Black African • White and Asian •

Prefer not to say • Any other mixed background, please write in:

Asian/Asian British

Indian • Pakistani • Bangladeshi • Chinese • Prefer not to say • Any other Asian background, please write in:

Black/ African/ Caribbean/ Black British

African • Caribbean • Prefer not to say • Any other Black/African/Caribbean background, please write in:

Other ethnic group

Arab • Prefer not to say • Any other ethnic group, please write in:



Do you consider yourself to have a disability or health condition including mental health condition?

Yes • No • Prefer not to say •

If yes, is this a

Physical condition/disability • Mental health condition/disability • Both •

Prefer not to say •

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment' in the recruitment process then please request this separately.