



Hope Church Dawlish

More people more like Jesus, in more places.

Equal Opportunities Monitoring Form

How this form will be used

Hope Church is committed to equality of opportunity for all job applicants and employees and ensures that no individual receives less favourable treatment on any of the protected characteristics under the Equality Act 2010: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion¹ or belief, sex or sexual orientation.

As part of this commitment we collect monitoring data on all applicants for our roles. This monitoring form is voluntary, but the information we collect is very useful in helping us to ensure we are inclusive in our advertising and recruitment. Please return a copy of this form along with your application to operations@hopedawlish.org

This form will be detached from the application form or CV before the short listing and interview process begins and will not be available to the selection panel.

The information you provide on this form will only be used for statistical monitoring except in the case of disability where it may be used to identify reasonable steps we can take to assist you through the selection process, if applicable. Recording of data will be anonymous and this form will be destroyed no later than 12 months after the role closes.

If you are successfully appointed to the post for which you are applying, your data will be kept on your employment profile and only be accessible by yourself and relevant members of the Leadership team.

Age	
<input type="checkbox"/> Under 16 years	<input type="checkbox"/> 45 - 54 years
<input type="checkbox"/> 16 - 24 years	<input type="checkbox"/> 55 - 64 years
<input type="checkbox"/> 25 - 34 years	<input type="checkbox"/> 65+ years
<input type="checkbox"/> 35 - 44 years	<input type="checkbox"/> Prefer not to disclose



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Ethnicity

<input type="checkbox"/> Arab	<input type="checkbox"/> Mixed - White and Asian
<input type="checkbox"/> Asian or Asian British - Indian	<input type="checkbox"/> Mixed - White and Black African
<input type="checkbox"/> Asian or Asian British - Pakistan	<input type="checkbox"/> Mixed - White and Black Caribbean
<input type="checkbox"/> Asian or Asian British - Bangladeshi	<input type="checkbox"/> Mixed - Other
<input type="checkbox"/> Asian or Asian British - Chinese	<input type="checkbox"/> White - British
<input type="checkbox"/> Asian or Asian British - Other	<input type="checkbox"/> White - Irish
<input type="checkbox"/> Black or Black British - African	<input type="checkbox"/> White - Gypsy or Irish Traveller
<input type="checkbox"/> Black or Black British - Caribbean	<input type="checkbox"/> White - Other
<input type="checkbox"/> Black or Black British - Other	<input type="checkbox"/> Other ethnic group
If 'Other' or you prefer to use your own term, please state: Click or tap here to enter text.	<input type="checkbox"/> Prefer not to disclose

Gender

<input type="checkbox"/> Female
<input type="checkbox"/> Male
<input type="checkbox"/> Prefer not to disclose

Religion and belief

<input type="checkbox"/> Buddhist	<input type="checkbox"/> Muslim
<input type="checkbox"/> Christian	<input type="checkbox"/> Non-religious (Atheist, Humanist, etc.)
<input type="checkbox"/> Hindu	<input type="checkbox"/> Sikh
<input type="checkbox"/> Jewish	<input type="checkbox"/> Other: Click or tap here to enter text.
<input type="checkbox"/> I prefer to use my own term (please state Click or tap here to enter text.)	<input type="checkbox"/> Prefer not to disclose

Sexual Orientation

<input type="checkbox"/> Bisexual	<input type="checkbox"/> Heterosexual/ straight
<input type="checkbox"/> Gay/ lesbian	<input type="checkbox"/> Prefer not to disclose



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

The Equality Act 2010 defines disability as 'a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities'

☐ Yes

☐ No

☐ Prefer not to disclose

If you have answered 'Yes' above, please give an outline of the nature of the disability or health condition: [Click or tap here to enter text.](#)

If you have answered 'Yes' above, what considerations can we make to ensure you can attend and take part in the selection process, if shortlisted? [Click or tap here to enter text.](#)

Where did you first find out about this role? (Please select one)

☐ Contacted directly by Hope Church

☐ Referred by a friend or colleague

☐ Internal candidate

☐ Hope Church newsletter

☐ Other Job Board: [Click or tap here to enter text.](#)

☐ Other website/ social media: [Click or tap here to enter text.](#)

☐ Other: [Click or tap here to enter text.](#)

Please return this form along with your job application to operations@hopedawlish.org

¹ Except as is legally permissible where it is determined that there is an occupational requirement that the post be filled by a Christian. If this is the case it will be clearly stated on all recruitment materials.