

**ANONYMOUS
Mind in Harrow
Equalities Monitoring Form**

For Office Use Only:	
Date Entered	
Entered by	
Number FIT	

This information will be used to ensure we provide services to all sections of the population. Please help us by answering as many questions as you can. Thankyou.

1. Your age

18-20 21-35 36-50 51-65 66+

2. Do you consider yourself to have a disability? (Please read below).

Under The Equality Act 2010, a person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities, which would include things like using a telephone, reading a book or using public transport.

Yes No

If "Yes" please indicate the type of impairment, which applies to you (by ticking next to it below). People may experience more than one type of impairment in which case tick all types that apply.

Physical mobility	
Blind / partially sighted	
Deaf / hard hearing	
Speech / language impairment	
Mental health problems	
Long-term health conditions (e.g. cancer / HIV / MS)	
Other progressive disability	

Learning disability	
Dyslexia	
Autism	
Brain injury	
Facial disfigurement	
Other hidden disability:	
Do not wish to disclosure	

3. Marital status

Civil Partnership Married Single

4. Pregnancy and maternity

Are you pregnant or currently breastfeeding? Yes No

5. Caring responsibilities

A Carer is defined as someone who provides unpaid care or support to a family member, neighbour, or friend on a regular / substantial basis because of illness, disability or age.

Do you have caring responsibilities? Yes No

6. What best describes your gender

Male Female

Is this gender the same as your gender at birth? Yes No

Prefer to self-describe

7. What is your sexual orientation?

Bisexual Gay /Lesbian Heterosexual/Straight

Prefer not to say Prefer to self-describe

8. Your faith or belief (please tick appropriate box)

No religion	
Christian*	
Buddhist	
Hindu	
Jewish	
Muslim	

Sikh	
Jain	
Parsi / Zoroastrian	
Baha'i	
Other faith group, please write in:	

* including Church of England, Catholic, Protestant and all other Christian denominations

9. Your ethnic group

These are based on the 2010 Census categories. Please choose ONE ethnic group and tick or write in appropriate box to indicate your ethnic background.

A. ASIAN OR ASIAN BRITISH

Afghani	
Bangladeshi	
Indian	
Pakistani	
Sinhalese	
Sri Lankan Tamil	
Any other Asian background, please write in:	

D. MIXED

White & African	
White & Caribbean	
White & Asian	
Any other Mixed background, please write in:	

B. BLACK OR BLACK BRITISH

Caribbean	
Ghanaian	
Nigerian	
Somali	
Any other Black background, please write in:	

E. WHITE

Albanian	
British	
Gypsy/Roma Traveller	
Irish	
Irish Traveller	
Polish	
Romanian	
Serbian	
Any other White background, please write in:	

C. OTHER ETHNIC GROUP

Arab	
Chinese	
Iranian	
Iraqi	
Kurdish	
Lebanese	
Any other ethnic group, please write in:	

Are you an EU citizen?

10. Please choose one of the categories below which is relevant to you:

Service User-Project

Recruitment-Post.....

Volunteer-Project

Staff Trustee Carer

Date form completed: