

**Equality & Diversity Monitoring**

The Royal College of Physicians of Edinburgh is committed to providing diversity in all areas of our work. To assist us to monitor the effectiveness of our equality and diversity practices we would encourage you to complete this monitoring form.

The information you provide will be treated as confidential. This form will be separated from your application before consideration of candidates takes place and will not be available to those involved in the selection process.

**Gender:** Female  Male  Prefer not to say

**Age**:

16-24  25-34  35-44  45-54  55-64  65+

Prefer not to say

**Are you married or in a civil partnership?** Yes  No  Prefer not to say

**Disability:** The Equality Act defines a disability as a physical or mental impairment which has a substantial and long term effect on a person’s ability to carry out normal day-to-day activities.

Do you consider yourself to have a disability Yes  No  Prefer not to say  according to the above definition?

If ‘Yes’ please provide details:

**Religion:** Tick one box from the section below to indicate your religion or belief.

Buddhism  Christianity  Hinduism

Islam  Judaism  Sikhism

Other  None  Prefer not to say

**Sexual orientation:** Tick one box from the section below to indicate which best describes your sexual orientation.

Bisexual  Heterosexual  Gay Man

Gay Woman/Lesbian  Other  Prefer not to say

Please continue on the next page.

**Ethnic origin:** Tick one box from the following sections to indicate your ethnic origin.

White

British  English  Irish

Gypsy or Irish Traveller  Northern Irish  Scottish

Welsh

Any other white background  Please provide details:

Mixed

White and Black Caribbean  White and Black African  White and Asian

Any other mixed background  Please provide details:

Asian, Asian Scottish, Asian British

Indian  Pakistani  Bangladeshi

Chinese

Any other Asian background  Please provide details:

Black, Black Scottish, Black British

Caribbean  African

Any other Black background  Please provide details:

Other Ethnic Group

Arab  Arab Scottish  Arab British

Any other ethnic group  Please provide details:

Prefer not to say

Thank you for completing this form. Please return to [standards@rcpe.ac.uk](mailto:standards@rcpe.ac.uk).