

Diversity and Inclusion Monitoring Form

London Treasury Limited (the Company) is a wholly owned subsidiary of the Greater London Authority (GLA) and subscribes to the GLA's values in respect of diversity and inclusion. 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 Company needs your help and co-operation to enable it to do this, but filling in this form is voluntary. The information provided will be kept confidential and will be used for monitoring purposes. Please return the completed form, along with the completed application form and a copy of your CV, to:

recruitment@londontreasury.org

Please mark all those that apply with 'X'
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Sex and gender identity

What is your sex?

Female

Male

Prefer not to say

Is the gender you identify with the same as your sex registered at birth?

Yes

No

Prefer not to say

If the gender you identify with is not the same as your sex registered at birth, please write in:

Age; please indicate which bracket

16-24

25-29

30-34

35-39

40-44

45-49

50-54

55-59

60-64

65+

Prefer not to say

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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.

Asian or Asian British

Indian

Pakistani

Bangladeshi

Chinese

Prefer not to say

Any other Asian background, please write in:

Black, African, Caribbean or Black British

African

Caribbean

Prefer not to say

Any other Black, African or Caribbean background, please write in:

Mixed or Multiple ethnic groups

White and Black Caribbean

White and Black African

White and Asian

Prefer not to say

Any other Mixed or Multiple ethnic background, please write in:

White

English

Welsh

Scottish

Northern Irish

Irish

British

Gypsy or Irish Traveller

Prefer not to say

Any other White background, please write in:

Other ethnic group

Arab

Prefer not to say

Any other ethnic group, please write in:

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

Yes

No

Prefer not to say

What is the effect or impact of your disability or health condition on your work?

Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment', then please discuss this with the recruiter.

What is your sexual orientation?

Heterosexual

Gay

Lesbian

Bisexual

Asexual

Pansexual

Undecided

Prefer not to say

If you prefer to use your own identity, please write in:

What is your religion or belief?

No religion or belief

Buddhist

Christian

Hindu

Jewish

Muslim

Sikh

Prefer not to say

If other religion or belief, please write in:

What is your working pattern?

Full-time

Part-time

Prefer not to say

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What is your flexible working arrangement?

None

Flexitime

Staggered hours

Term-time hours

Annualised hours

Job-share

Flexible shifts

Compressed hours

Homeworking

Prefer not to say

If other, please write in:

Do you have caring responsibilities? If yes, please mark with X all that apply

None

Primary carer of a child/children (under 18)

Primary carer of disabled child/children

Primary carer of disabled adult (18 and over)

Primary carer of older person

Secondary carer (another person carries out the main caring role)

Prefer not to say

Are you married or in a civil partnership?

Yes

No

Prefer not to say

Please indicate the reference number and role being applied for.