

**Capital Theatres**  
**Equal Opportunities Monitoring**  
**(Confidential)**

Capital Theatres is committed to providing equal opportunities to all members of staff and job applicants and will not discriminate either directly or indirectly on the grounds of age, disability, sex, gender reassignment, pregnancy, maternity, race (including colour, nationality and ethnic or national origin), sexual orientation, religion or belief, or because someone is married or in a civil partnership.

To ensure that this recruitment complies with our policy please complete all shaded areas of the application form using black ink, written clearly or typed. All information gathered will be treated in the strictest confidence. This monitoring form does not form part of your application and will therefore be detached from it on receipt and stored separately.

Full name					
Position applied for					
Are you already employed by Capital Theatres	✓	Yes		No	
Gender	✓	Male		Female	Prefer not to say
Do you identify as transgender/transsexual	✓	Yes		No	Prefer not to say
Your date of birth					

Your age – please tick one ✓

16-18		21-30		41-50		61-70	
18-20		31-40		51-60		70+	

Disability

Do you consider yourself to have a disability? If yes please describe.	yes/no
Do you require any adjustments to be made to assist you at interview? If yes please describe	yes/no

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Your ethnic origin – please tick one ✓

WHITE		BLACK		ASIAN		OTHER	
Scottish	<input type="checkbox"/>	Scottish	<input type="checkbox"/>	Scottish	<input type="checkbox"/>	Mixed	<input type="checkbox"/>
English	<input type="checkbox"/>	English	<input type="checkbox"/>	English	<input type="checkbox"/>	Other	<input type="checkbox"/>
Welsh	<input type="checkbox"/>	Welsh	<input type="checkbox"/>	Welsh	<input type="checkbox"/>		<input type="checkbox"/>
Irish	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Irish	<input type="checkbox"/>		<input type="checkbox"/>
Other	<input type="checkbox"/>	African	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Chinese	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>	Indian	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Rather not say	<input type="checkbox"/>

Other ethnic origin - please describe: \_\_\_\_\_

Religion or belief

Buddhist	<input type="checkbox"/>	Jewish	<input type="checkbox"/>	Roman Catholic	<input type="checkbox"/>	Church of Scot	<input type="checkbox"/>
Muslim	<input type="checkbox"/>	Hindu	<input type="checkbox"/>	Sikh	<input type="checkbox"/>	Other Christian	<input type="checkbox"/>
Other	<input type="checkbox"/>	None	<input type="checkbox"/>	Rather not say	<input type="checkbox"/>		<input type="checkbox"/>

Sexual Orientation

Bisexual	<input type="checkbox"/>	Heterosexual	<input type="checkbox"/>	Gay	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>
Rather not say	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

For the purposes of compliance with the Data Protection Act I hereby confirm that by completing this form I give my consent to the Trust processing the data supplied for the purposes of equal opportunities monitoring.

Signed		Date	
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*for electronic submissions - typing your name here will constitute agreement*