**Quarantine’s Monitoring Form 2017**

The information you choose to provide below will be used for the purpose of monitoring the effectiveness of Quarantine’s Single Equality Policy and our formal and informal efforts to improve the conditions for diversity. We will use this data to provide anonymous statistical information to our main funder, Arts Council England, and other funders about the diversity of our organization, and it will inform our aspirations going forward.

|  |  |
| --- | --- |
| **What is your gender identity?** |  |

|  |  |
| --- | --- |
| **Age:**  |  |

|  |  |
| --- | --- |
| **Disability: do you have an impairment, health condition or learning difference?** | Yes or No |

|  |
| --- |
| **What is your ethnic origin?:** please place ‘X’ against the option that best describes this. |

|  |  |  |  |
| --- | --- | --- | --- |
|  White  |  |  Mixed or dual heritage |  |
|  Black or British Black |  |  Other ethnic background (please state): |  |
|  Asian or British Asian |  |  Prefer not to disclose |  |
|  Chinese |  |  Not known |  |

|  |
| --- |
| **Pregnancy and maternity** |
| Are you currently pregnant or have you been pregnant in the last year? |
| Yes | No | Prefer not to say |
|  |  |  |

|  |
| --- |
| **Is your gender identity the same as the gender you were assigned at birth** |
| Yes  | No | Prefer not to say |
|  |  |  |

|  |
| --- |
| **Sexual orientation monitoring:** please place ‘X’ against the option that best describes this.  |

**How would you describe your sexual orientation?**

*

|  |  |  |  |
| --- | --- | --- | --- |
|  Heterosexual |  |  Bi-sexual  |  |
|  Gay/Lesbian |  |  Prefer not to say |  |
|  Other |  |  |  |

**Religion monitoring:** please place ‘X’ against the option that best describes this.

**How would you describe your religion or belief?**

My religion or belief is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| I have no religion or belief |  | I prefer not to say |  |