



# TREE AID Equal Opportunities Monitoring Form

TREE AID is an equal opportunities employer. TREE AID aims to ensure that all applicants, trustees, staff and volunteers do not suffer less favourable treatment on the grounds of race, colour, nationality, religion, ethnic or national origins, age, gender, marital status or family situation, sexual orientation or disability. We aim to ensure that all people with whom we work are valued for their contributions and are given the opportunity to realise their full potential within TREE AID.

Selection criteria and procedures are regularly reviewed to ensure that individuals are treated on the basis of their relevant abilities and merits according to the requirements of the job.

All workers will be given equal opportunity and access to training to enable them to progress both within and outside the organisation. TREE AID is committed to a programme of action to make this policy effective and will bring it to the attention of all workers.

In order to ensure effective equal opportunities we need to obtain certain information. Your co-operation is sought in providing this. The information provided will only be used by TREE AID to ensure effective equal opportunities. Please leave blank any questions you do not wish to answer. The information provided is used for statistical purposes only.

**Position applied for:** \_\_\_\_\_

**Gender:** Female  Male

**Ethnicity:**

**Asian or Asian British**

Bangladeshi  Indian  Pakistani   
Other Asian background

**Black or Black British**

African  Caribbean  Other Black background

**Chinese or other ethnic group**

Chinese  Other South East Asian

**White**

British  Irish  Other White background

**Dual Heritage**

White & Asian  White & Black Caribbean  White & Black African   
Other

**Disability:** The Disability Discrimination Act (1995) describes a disability as 'a physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day-to-day activities'.

Would you consider yourself disabled under this definition? Yes  No

If "Yes" what is the nature of this disability? \_\_\_\_\_

Do you need any equipment, support or special consideration for the access because of your disability/ies?  Yes  No

If "Yes" please specify: \_\_\_\_\_

Are you or have you been a TREE AID volunteer? Yes  No

Name: (Capitals please) \_\_\_\_\_

**Thank you for your co-operation**