

Why do we ask this information?

VAL wants to ensure that employees, volunteers, applicants and groups are treated fairly and having information about you will help us measure our progress towards becoming a more equitable organisation.

All information we collect will be anonymous and will be kept confidential and secure.

If you don't want to answer any specific question please tick **Prefer not to say**.

What is your ethnic group?

(Choose one option that best describes your ethnic group or background)

White

English/Welsh/Scottish/Northern Irish/British

Irish

Gypsy or Irish Traveller

Other White background, please describe:

Mixed/Multiple ethnic groups

White and Black Caribbean

White and Black African

White Asian

Other Mixed/Multiple ethnic background, please describe:

Asian/Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background, please describe:

Black/African/Caribbean/Black British

African

Caribbean

Other Black/African/Caribbean background, please describe

Other ethnic group

Arab

Any other ethnic group please specify:

Prefer not to say

Age

16 - 24

25 - 34

35 - 44

45 - 54

55 - 64

65 - 74

Over 75

Prefer not to say

Gender

Female

Male

Trans Female

Trans Male

Gender Non-Conforming

Other (please state)

Prefer not to say

Gender Identity

Is your gender identity the same as the gender you were assigned at birth?

Yes

No

Prefer not to say

Caring Responsibilities

A carer is someone who provides unpaid support/care for a family member, friend etc who needs help with their day to day life because they are disabled, have a long term illness or they are elderly.

Are you a carer?

Yes

No

Prefer not to say

Childcare responsibilities

Do you have unpaid responsibility for children as a parent/granparent/guardian etc?

Children ages 0 - 4

Children aged 5 - 10 (primary)

Children aged 11 - 18 (secondary)

No childcare responsibilities

Prefer not to say

Are you pregnant or have you given birth in the last 26 weeks?

Yes

No

Prefer not to say

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

Are your day to day activities affected because of health issues?

Yes

No

Prefer not to say

If you have answered 'Yes' please write in the Other box below what best describes your disability or health issue. This helps us improve access and remove barriers to our services.

Other:



Would you categorise yourself as neurodivergent?

Yes

No

Prefer not to say

If you have answered 'Yes' please write in the Other box below what best describes your neurodivergent status. This helps us improve access and remove barriers to our services.

Other:

Religion/ Belief

No religion

Buddhist

Christian

Muslim

Jewish

Sikh

Hindu

Prefer not to say

Other

Sexual Orientation

Bisexual

Gay Man

Lesbian/Gay Woman

Heterosexual/Straight

Prefer not to say

Other

Relationship Status

Civil Partnership

Married

Cohabiting

Single

Prefer not to say

Other

Postcode

What is the first part of your post code? e.g LS10

(First part of your post code e.g LS10)

Prefer not to say



Residency - Are you a British/United Kingdom citizen?

Yes

No

Prefer not to say

Are you a national of another country?

EU National

No

Prefer not to say

Other (please state below):

Employment Status

Student

Employed/Self Employed

Not employed and looking for work

Not employed and unable to work

Apprenticeship scheme/training

Retired

Prefer not to say

Other (please state below):