



## Equal Opportunities Monitoring Form

Credition Town Council is committed to ensuring that all job applicants and members of staff are treated equally, without discrimination because of gender, sexual orientation, marital or civil partner status, gender reassignment, race, colour, nationality, ethnic or national origin, religion or belief, disability or age. This form is intended to help us maintain equal opportunities best practice and identify barriers to workforce equality and diversity.

Please complete this form and return it with your application. The form will be separated from your application on receipt. The information on this form will be used for monitoring purposes only and will play no part in the recruitment process.

All questions are optional. You are not obliged to answer any of these questions but the more information you supply, the more effective our monitoring will be. All information supplied will be treated in the strictest confidence. It will not be placed on your personnel file.

### About the vacancy

**Please state which job you have applied for and the closing date given for applications:**

|                                |                                               |
|--------------------------------|-----------------------------------------------|
| Job applied for:               | YOUTH AND COMMUNITY SUPPORT WORKER APPRENTICE |
| Closing date for applications: | MONDAY 17 AUGUST 2026                         |

### Gender

**What is your gender (please tick)?**

|                   |  |
|-------------------|--|
| Male              |  |
| Female            |  |
| Prefer not to say |  |

*(If you are undergoing gender reassignment, please use the gender identity you intend to acquire.)*

### Gender identity

**Do you identify as transgender/transsexual?**

|                   |  |
|-------------------|--|
| Yes               |  |
| No                |  |
| Prefer not to say |  |



# CREDITON TOWN COUNCIL

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Devon  
EX17 2BT  
Telephone: 01363 773717  
Email: [reception@crediton.gov.uk](mailto:reception@crediton.gov.uk)

## Ethnic group

How would you describe your nationality and/or ethnicity (please tick)?

|                                         |  |                              |  |                              |  |
|-----------------------------------------|--|------------------------------|--|------------------------------|--|
| A<br>White:                             |  | B<br>Mixed race:             |  | C<br>Asian or Asian British: |  |
| British - English,<br>Scottish or Welsh |  | White and Black<br>Caribbean |  | Indian                       |  |
| Irish                                   |  | White and Black<br>African   |  | Pakistani                    |  |
| Other White<br>background               |  | White and Asian              |  | Bangladeshi                  |  |
|                                         |  | Other Mixed<br>background    |  | Other Asian background       |  |

|                                 |  |                                   |  |                   |  |
|---------------------------------|--|-----------------------------------|--|-------------------|--|
| D<br>Black or Black<br>British: |  | E<br>Chinese and other<br>groups: |  |                   |  |
| Caribbean                       |  | Chinese                           |  | Prefer not to say |  |
| African                         |  | Other ethnic group                |  |                   |  |
| Other Black<br>background       |  |                                   |  |                   |  |

## Age

What is your age (please tick)?

|       |  |       |  |       |  |       |  |                   |  |
|-------|--|-------|--|-------|--|-------|--|-------------------|--|
| 16-17 |  | 18-21 |  | 22-30 |  | 31-40 |  | 41-50             |  |
| 51-60 |  | 61-65 |  | 66-70 |  | 71+   |  | Prefer not to say |  |

## Sexual orientation

How would you describe your sexual orientation (please tick)?

|              |  |                   |  |           |  |
|--------------|--|-------------------|--|-----------|--|
| Heterosexual |  | Gay               |  | Lesbian   |  |
| Bisexual     |  | Asexual           |  | Pansexual |  |
| Other        |  | Prefer not to say |  |           |  |



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## Religion or belief

Please describe your religion or other strongly-held belief.

|                                            |  |
|--------------------------------------------|--|
| I would describe my religion or belief as: |  |
| I have no particular religion or belief    |  |
| Prefer not to say                          |  |

## Disability

The Equality Act 2010 defines a disability as a "physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities". An effect is long-term if it has lasted, or is likely to last, more than 12 months.

Do you consider that you have a disability under the Equality Act (please tick)?

|                                                  |  |            |  |
|--------------------------------------------------|--|------------|--|
| Yes                                              |  | No         |  |
| Used to have a disability but have now recovered |  | Don't know |  |
| Prefer not to say                                |  |            |  |