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| **MONITORING INFORMATION – REQUIRED FOR ALL STAFF** |
| The data in this form is used for statistical purposes to assist the University in meeting its obligations in accordance with the Equality Act 2010, to monitor the performance of its Equality, Diversity & Inclusion Policy and to provide information for the annual statistical returns to the Higher Education Statistics Agency (HESA). Any reports produced using this information are anonymised. Any information given on this form will be treated in the strictest confidence. The form will be retained in a secure location on your Employee Records file in Human Resources. |

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| NAME | | | | | |
| Title |  | First Name |  | Surname |  |

**Please denote your selection in the following sections by placing a Y in the appropriate box**

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| GENDER | | | | | |
| Male |  | Female |  | Other (please specify) |  |

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| GENDER IDENTITY | | |
| 01 | Gender identity is the same as the gender originally assigned at birth |  |
| 02 | Gender identity is different to the gender originally assigned at birth |  |
| 98 | Do not wish to disclose information |  |
| 99 | Not Available |  |

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| SEXUAL ORIENTATION | | | | | | | | |
| 10 | Bisexual |  | 11 | Gay Women/Lesbian |  | 12 | Heterosexual or straight |  |
| 19 | Other sexual Orientation |  | 98 | Prefer not to say |  | 99 | Not Available |  |

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| MARITAL STATUS \* Legal status relating to same-sexed couples created under the Civil Partnership Act 2004 | | | | | | |
| 10 | Never married and never registered in a civil partnership | | | |  | |
| 11 | Married or in a registered civil partnership\* | | | |  | |
| 12 | Separated (but still legally married or in a civil partnership) | | | |  | |
| 13 | Divorced or formerly in a civil partnership which is now legally dissolved | | | |  | |
| 14 | Widowed or a surviving partner from a registered civil partnership | | | |  | |
| 15 | Co-habiting, with or without a legal contract | | | |  | |
| 98 | Prefer not to say |  | 99 | Not available | |  |

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| RELIGION | | | | | | | | | | | |
| 20 | No Religion | | | |  | 21 | Buddhist | | | |  |
| 22 | Christian | | | |  | 23 | Christian - Church of Scotland | | | |  |
| 24 | Christian - Roman Catholic | | | |  | 25 | Christian - Presbyterian Church in Ireland | | | |  |
| 26 | Christian - Church of Ireland | | | |  | 27 | Christian - Methodist Church in Ireland | | | |  |
| 28 | Christian - Other denomination | | | |  | 29 | Hindu | | | |  |
| 30 | Jewish | | | |  | 31 | Muslim | | | |  |
| 32 | Pagan | | | |  | 33 | Sikh | | | |  |
| 80 | Any Other Religion or belief |  | 98 | Prefer not to say | | | |  | 99 | Not available |  |

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| DISABILITY (please see over for more detail) | | | |
| No known impairment, health condition, or learning difficulty |  | Disabled |  |
| Not known |  | Prefer not to say |  |

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| DISABILITY CATEGORIES | | | | | |
| Under the Equality Act 2010, a person is considered to have a disability 'if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities’. ‘Substantial' is defined by the Act as 'more than minor or trivial'. An ‘impairment’ is considered to have a long-term effect if:  *It has lasted, or is likely to last for at least 12 months OR it is likely to last for the rest of the life of the person.* | | | | | |
| 51 | Learning difference such as dyslexia, dyspraxia or AD(H)D |  | 53 | Social/communication conditions such as a speech and language impairment or an autistic spectrum condition |  |
| 54 | Long-term illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy |  | 55 | Mental health condition, challenge or disorder, such as depression, schizophrenia, or anxiety |  |
| 56 | Physical impairment (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying) |  | 57 | D/deaf or have a hearing impairment |  |
| 58 | Blind or have a visual impairment uncorrected by glasses |  | 59 | Development condition that you have had since childhood which affects motor, cognitive, social, and emotional skills, and speech and language |  |
| 95 | **No known impairment, health condition or learning difference** |  | 96 | An impairment, health condition or learning difference not listed above |  |
| 98 | Prefer not to say |  | 99 | Not available |  |

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| NATIONALITY (HESA Coding) Please review the HESA list of Nationalities from the drop down list and enter the country initials and name into the boxes below  For example: GB = United Kingdom | |
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| Nationality | Choose an item. |

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| **ETHNIC ORIGIN** | | | | | |
| 100 | Asian - Bangladeshi or Bangladeshi British |  | 159 | Any other Mixed or Multiple ethnic background |  |
| 101 | Asian - Chinese or Chinese British |  | 160 | White - English, Scottish, Welsh, Northern Irish or British |  |
| 103 | Asian - Indian or Indian British |  | 163 | White - Gypsy or Irish Traveller |  |
| 104 | Asian - Pakistani or Pakistani British |  | 166 | White - Irish |  |
| 119 | Any other Asian background |  | 168 | White - Roma |  |
| 120 | Black - African or African British |  | 179 | Any other White background |  |
| 121 | Black - Caribbean or Caribbean British |  | 180 | Arab |  |
| 139 | Any other Black background |  | 899 | Any other ethnic background |  |
| 140 | Mixed or multiple ethnic groups - White or White British and Asian or Asian British |  | 997 | Not known |  |
| 141 | Mixed or multiple ethnic groups - White or White British and Black African or Black African British |  | 998 | Prefer not to say |  |
| 142 | Mixed or multiple ethnic groups - White or White British and Black Caribbean or Black Caribbean British |  |  |  |  |

**MPLOYMENT HISTORY**

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| **EMPLOYMENT HISTORY (General)** | | | |
| Who was your previous employer? (please name) |  | | |
| Was it a public or private sector organisation? | Public  Private | | |
| Have you previously worked in an HEI? | Yes  No | | |
| If so, please name the HEI’s, and confirm start and end date and position held? | | | |
| Higher Education Institute | Dates: From - To | | Position Held |
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| Please provide your previous HESA ID number (if known) | |  | |

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| **EMPLOYMENT HISTORY (HESA Coding details)** | | | | | |
| 01 | Another publicly funded higher education institution in the UK |  | 02 | Publicly funded higher education institution in an overseas country |  |
| 03 | Other education provider in the UK |  | 04 | Other education provider in an overseas country |  |
| 05 | Research provider in the UK |  | 06 | Research provider overseas |  |
| 07 | Student in the UK |  | 08 | Student in an overseas country |  |
| 09 | NHS/General medical or General dental practice in the UK |  | 10 | Health service in an overseas country |  |
| 11 | Other public sector in the UK |  | 12 | Private industry/commerce in the UK |  |
| 13 | Self-employed in the UK |  | 14 | **Other employment in the UK** |  |
| 15 | Other employment in an overseas country |  | 16 | Working in a research institute (private) in the UK |  |
| 17 | Working in a research institute (private) in an overseas country |  | 18 | Working in a research institute (public) in the UK |  |
| 19 | Working in a research institute (public) in an overseas country |  | 20 | Working in the voluntary sector |  |
| 21 | Not in regular employment |  | 22 | Working in the voluntary sector in the UK |  |
| 23 | Working in the voluntary sector in an overseas country |  | 99 | Not known |  |

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| Previous Employer Higher Education Institute HESA Coding If you have previously worked at a UK HEI, please select the most recent institution from the HESA University drop down list below .  For example RVC is 0143 – The Royal Veterinary College. | |
| Previous HEI | Choose an item. |

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| **QUALIFICATIONS (HQ Held HESA Coding)**  **Please select the highest qualification you hold** | | | | | | | | | | | |
| 01 | Doctorate | | | |  | 02 | Other Higher Degree | | | |  |
| 03 | PGCE | | | |  | 09 | Other Postgraduate qualification (including Professional) | | | |  |
| 11 | First Degree | | | |  | 12 | First Degree with qualified Teacher Status (QTS) | | | |  |
| 19 | Other qualification at 1st Degree (including Professional) | | | |  | 21 | Diploma of HE | | | |  |
| 22 | HND/HNC | | | |  | 29 | Other undergraduate qualification (including professional) | | | |  |
| 31 | A level/Scottish Higher or equivalent | | | |  | 32 | O’ Level/GCSE or equivalent | | | |  |
| 97 | Other qualification |  | 98 | Prefer not to say | | | |  | 99 | Not Known |  |

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| **Academic Teaching Qualifications (ACTCHQUAL HESA Coding)**  **Please select the relevant qualification** | | | | | |
| 01 | Successfully completed an institutional provision in teaching in the higher education sector accredited against the UK Professional Standards Framework | | | |  | |
| 06 | Holder of a National Teaching Fellowship Scheme Individual Award | | | |  | |
| 07 | Holder of a PGCE in higher education, secondary education, further education, lifelong learning, or any other equivalent UK qualification | | | |  | |
| 08 | Accredited as a teacher of their subject by a professional UK body | | | |  | |
| 09 | Other UK accreditation or qualification in teaching in the higher education sector | | | |  | |
| 10 | Overseas accreditation or qualification for any level of teaching | | | |  | |
| 11 | Recognised by Advance HE as an Associate Fellow against Descriptor 1 of the UKPSF | | | |  | |
| 12 | Recognised by Advance HE as a Fellow against Descriptor 2 of the UKPSF | | | |  | |
| 13 | Recognised by Advance HE as a Senior Fellow against Descriptor 3 of the UKPSF | | | |  | |
| 14 | Recognised by Advance HE as a Principal Fellow against Descriptor 4 of the UKPSF | | | |  | |
| 15 | Recognised by SEDA against Descriptor 1 of the UKPSF | | | |  | |
| 16 | Recognised by SEDA against Descriptor 2 of the UKPSF | | | |  | |
| 90 | Not known |  | **99** | **No academic teaching qualification held** |  | |

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| ESSENTIAL QUALIFICATIONS AND MEMBERSHIP OF PROFESSIONAL BODIES - Please list relevant qualifications as to your role and membership of relevant professional bodies (BVetMed, BA, RCVS etc.). *MRCVS registration no (if applicable):* | | |
| Professional Body | Qualifications | Registration No. If applicable |
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| DECLARATION | | | |
| I declare that to the best of my knowledge the information given above is correct. I consent to this data being held in accordance with the Data Protection Act 2018 and used for monitoring purposes. | | | |
| Signature |  | Date |  |

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| **FOR HR OFFICE USE ONLY** | | | | | | | | |
| Employee No |  | | | | iTrent Position No |  | | |
| HR Data Input | |  | Date |  | HR Data Input Checked |  | Date |  |