**Equalities Monitoring Form**

This Equalities Monitoring Form is anonymous and will, on receipt, be processed separately from your submission.

The data is managed confidentially, is not personally attributable, will have no bearing on your submission and is processed in accordance with the General Data Protection Regulation.

#### How old are you?

16-24

25-34

35-44

45-54

55-64

65-74

75 or over

I'd rather not say

#### Do you consider yourself to have a disability?

Yes

No

I'm not sure or I'd rather not say

#### Which option best describes your ethnic group or background?

White Scottish

White British

White Irish

White Gypsy/Traveller

White Polish

Any other white ethnic group (please describe below)

Any mixed or multiple ethnic groups (please describe below)

Pakistani, Pakistani Scottish or Pakistani British

Indian, Indian Scottish or Indian British

Bangladeshi, Bangladeshi Scottish or Bangladeshi British

Chinese, Chinese Scottish or Chinese British

Any other Asian ethnic group (please describe below)

African, African Scottish or African British

Any other African ethnic group (please describe below)

Caribbean, Caribbean Scottish or Caribbean British

Black, Black Scottish or Black British

Any other Caribbean or Black ethnic group (please describe below)

Arab, Arab Scottish or Arab British

Any other ethnic group (please describe below)

I'd rather not say

Ethnicity description (if required)

#### What is your gender?

Male

Female

I'd rather not say

Other (please describe below)

Gender description (if required)

#### Are you transgender?

Yes

No

I'd rather not say

Other (please describe below)

Description (if required)

#### Are you LGBT?

Yes

No

I'd rather not say

Description (if required)