**Equality monitoring (part 2 of application form)**

*This section is for equality monitoring purposes and the information you provide will be anonymised and will not be available to recruiting supervisory teams. Wellcome wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the applicants in encouraging equality and diversity.*

*HARP needs your help and co-operation to enable us to do this. Please see guidance document for further information.*

**Gender** Man  Woman  Intersex  Non-binary  Prefer not to say  If you prefer to use your own term, please specify here …………………….

**Are you married or in a civil partnership?** Yes  No  Prefer not to say 

**Age** 16-24 25-29  30-34  35-39 40-44  45-49  50-54 55-59  60-64  65+  Prefer not to say 

***What is your ethnicity:***

*Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box*

***White***

English  Welsh  Scottish  Northern Irish  Irish 

British  Gypsy or Irish Traveller  Prefer not to say 

Any other white background, please write in:

***Mixed/multiple ethnic groups***

White and Black Caribbean  White and Black African  White and Asian  Prefer not to say  Any other mixed background, please write in:

***Asian/Asian British***

Indian  Pakistani  Bangladeshi  Chinese  Prefer not to say 

Any other Asian background, please write in:

***Black/ African/ Caribbean/ Black British***

African  Caribbean  Prefer not to say 

Any other Black/African/Caribbean background, please write in:

***Other ethnic group***

Arab  Prefer not to say  Any other ethnic group, please write in:

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

Yes No  Prefer not to say 

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with the HARP manager.

***Do you have any special requirements?***

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| --- |
|  |

*IMPORTANT: the information you provide here will not negatively impact the academic judgement of your application, or the decision about whether to offer you a place. Under the Equality Act 2010, it is unlawful for any information you provide about an impairment or condition to be used in making an academic decision about your application.*

**What is your sexual orientation?**

Heterosexual  Gay  Lesbian  Bisexual 

Prefer not to say 

If you prefer to use your own term, please specify here ……………………………………………….….

**What is your religion or belief?**

No religion or belief  Buddhist  Christian  Hindu  Jewish 

Muslim  Sikh  Prefer not to say  If other religion or belief, please write in:

**What is your current working pattern?**

Full-time  Part-time  Prefer not to say 

**What is your flexible working arrangement?**

None  Flexi-time  Staggered hours  Term-time hours 

Annualised hours  Job-share  Flexible shifts  Compressed hours 

Homeworking  Prefer not to say  If other, please write in:

**Do you have caring responsibilities? If yes, please tick all that apply**

None  Primary carer of a child/children (under 18) 

Primary carer of disabled child/children 

Primary carer of disabled adult (18 and over)  Primary carer of older person 

Secondary carer (another person carries out the main caring role) 

Prefer not to say 

**Socio-economic variables**

**What type of school did you attend for the majority of your time between the ages of 11 - 16?**

A state-run or state-funded school in the UK - Non-selective 

A state-run or state-funded school outside the UK - Non-selective 

A state-run or state-funded school in the UK - Selective on academic, faith or other ground 

A state-run or state-funded school outside the UK - Selective on academic, faith or other ground 

Independent or fee-paying school in the UK 

Independent or fee-paying school outside the UK 

I don't know 

Prefer not to say 

**When you were 18, had any of your parents or guardians completed a university degree course or equivalent (e.g., BA, BSc or higher)?**

Yes  No  I don’t know  Prefer not to say 

**Please tell us about the occupation of your main household earner when you were aged 14. If this question does not apply to you (because, for example, you were in care at this time) select "This question does not apply to me".**

Clerical and intermediate occupations such as: secretary, personal assistant, clerical worker, call centre agent, nursery nurse 

Long term unemployed (claimed Jobseeker's Allowance or earlier unemployment benefit for more than a year) 

Middle or junior managers such as: office manager, retail manager, bank manager, restaurant manager, warehouse manager 

Modern professional occupations such as: teacher nurse, physiotherapist, social worker, musician, police officer (sergeant or above), software designer 

Routine manual and service occupations such as: HGV driver, cleaner, porter, packer, labourer, waiter/waitress, bar staff 

Retired 

Senior managers or administrators (usually responsible for planning, organising and coordinating work, and for finance) such as: finance manager, chief executive 

Semi-routine manual and service occupations such as: postal worker, machine operative, security guard, caretaker, farm worker, catering assistant, sales assistant 

Technical and craft occupations such as: motor mechanic, plumber, printer, electrician, gardener, train driver 

Traditional professional occupations such as: accountant, solicitor, medical practitioner, scientist, civil /mechanical engineer 

This question does not apply to me 

I don’t know 

Prefer not to say 

**Were you** **eligible for free school meals during your primary or secondary schooling?**

Yes  No  I don’t know  Prefer not to say 

Many thanks for completing your application form. Please send this to info@harpphd.org with part 1 of your application form.