Insert Project name on behalf of Glasgow City Council and the Scottish Government, are asking you for some information about yourself to ensure we comply with the Equality Act 2010. This is a law to make sure all people are treated fairly and equally. Glasgow City Council and The Scottish Government will use your information to monitor the effectiveness of No-one Left Behind, Parental Employability Support Fund, Young Person’s Guarantee services, and to ensure that there are equal opportunities for everyone to achieve their potential, irrespective of race, sexual orientation and/or religion or belief.

Your information will never be published in a way that allows you to be identified. It will be treated in the strictest confidence and held, shared and used securely, as set out in the Privacy Statement given to you by Glasgow Life.

|  |  |  |  |
| --- | --- | --- | --- |
| **Start date** |  | **Ref: (DOB & Initials)** |  |

|  |
| --- |
| **Gender –** please tick one |
| Male |  | Female |  | Other |  | Prefer not to say |  |

|  |
| --- |
| **Ethnic Origin -** please tick one |
| **White** | **Asian** | **Other**  |
| Scottish |  | Pakistani, Pakistani Scottish, Pakistani British |  | African, African Scottish African British  |  | African Other  |  |
| Other British |  | Indian, Indian Scottish, Indian British |  | Black, Black Scottish, Black British |  | Black Other |  |
| Irish |  | Bangladeshi, Bangladeshi Scottish, Bangladeshi British |  | Caribbean, Caribbean Scottish, Caribbean British |  | Caribbean Other |  |
| Polish |  | Chinese, Chinese Scottish, Chinese British |  | Arab, Arab Scottish, Arab British |  | Mixed or multiple ethnic group |  |
| Gypsy Traveller |  | Asian Other |  | Other Ethnic group |  |  |  |
| Other |  | Prefer not to say |  |

|  |
| --- |
| **Religion –** please tick one |
| Church of Scotland |  | Buddhist |  | Hindu |  | Another Religion |  |
| Other Christian |  | Jewish |  | Sikh |  | None |  |
| Roman Catholic |  | Muslim |  | Pagan |  | Prefer not to say |  |

|  |
| --- |
| **Sexual Orientation –** please tick one |
| Bisexual |  | Gay / Lesbian |  | Heterosexual / straight |  |
|  |  | Other |  | Prefer not to say |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Do you consider yourself to have a disability?** Please tick one | Yes |  | No |  | Prefer not to say |  |

|  |
| --- |
| **Data Protection Notes**  |
| I confirm that I have signed the NOLB/PESF/YPG Privacy Statement and I am aware of how my data is being held and used. | (Please tick) |