



# Westhope Care Ltd

## Equal Opportunities Monitoring Form

The information supplied on this form will be used in total confidence and in accordance with current Data Protection Legislation. It will help to ensure that the home properly monitors and conforms with its policies relating to the equal opportunity.

Information will be used for monitoring and no other purpose.

Our committed aim is to allow our staff to develop their skills and realise their maximum potential as individual without any wish on the part of the home to limit their opportunities.

Please place a tick in the relevant box or boxes:

Would you describe your ethnic origin as:			
<input type="checkbox"/>	White European Asian African Hispanic Pakistani	<input type="checkbox"/>	African Caribbean Chinese English Indian Mixed
Other, please specify :			

Are you	<input type="checkbox"/>	Male / Female	<input type="checkbox"/>
---------	--------------------------	---------------	--------------------------

Please indicate your age in the ranges below:							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18-21	22-25	26-30	31-35	36-40	41-50	51-60	61-65

Do you consider that you have a disability?	<input type="checkbox"/>	Yes / No	<input type="checkbox"/>
If Yes, please indicate the nature of the disability:			

Name:	<input type="text"/>
Date	<input type="text"/>