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**Future Workspace Fund**

**Diversity Monitoring Form**

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| **This Diversity Monitoring Form is for submission alongside the Second Round Application Form.** Please provide answers for each person on your senior management team and board of directors. Please use more than one Diversity Monitoring Form if required.*You can select "Prefer not to say" if you would rather not answer any question.*The information you provide here:* is voluntary;
* will stay confidential; and,
* will **not** be used as part of the application assessment process.
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| **Summary Information** |
| How many people are in your senior management team and board of directors?  |       |
| Of these, how many are: |  |
| * Black, Asian or minority ethnic
 |       |
| * Disabled:
 |       |
| * Female
 |       |
| * Lesbian, Gay, Bisexual or Transgender (LGBT)
 |       |
| * Prefer not to say
 |       |
| Date of completing this form |       |
| How many Diversity Monitoring Forms are you completing? |       |

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| **1. Ethnic origin** *(please tick below)* |
| **Ethnic Group** | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| **White** |  |  |  |  |  |  |  |
| English / Welsh / Scottish / Northern Irish / British | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Irish | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| PortugueseSpanish | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Polish | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Gypsy or Irish Traveller | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Any other White background – please specify |  |  |  |  |  |  |  |
| **Mixed / multiple ethnic groups** |  |  |  |  |  |  |  |
| White and Black Caribbean | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| White and Black African | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| White and Asian | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Any other Mixed / multiple ethnic background – please specify |  |  |  |  |  |  |  |
| **Asian / Asian British** |  |  |  |  |  |  |  |
| Indian | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Pakistani | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Bangladeshi | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Chinese | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Any other Asian background – please specify |  |  |  |  |  |  |  |
| **Black / African / Caribbean / Black British** |  |  |  |  |  |  |  |
| African | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Caribbean | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Any other Black / African / Caribbean background, write in |  |  |  |  |  |  |  |
| **Other ethnic group** |  |  |  |  |  |  |  |
| Latin American | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Arab | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Any other ethnic group – please specify |  |  |  |  |  |  |  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **2. Age** *(please tick below)* |
| **Age** | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| 18-24 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 25-34 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 35-44 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 45-54 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 55-64 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 65-74 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 75-84 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 85+ | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **3. Disability** *(please tick below)* |
| **Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?** *Please include problems related to old age.*  |
| **Disability**  | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| Yes, limited a lot | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Yes, limited a little | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| No | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **4. Religion, faith or belief** *(please tick below what best describes the religion)* |
| **Religion** | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| Atheist | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Buddhist | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Christian | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Hindu | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Jewish | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Muslim | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Sikh | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Other – please specify |  |  |  |  |  |  |  |
| No religion | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **5. Gender**  |
| **Gender** | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| Male | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Female | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Self identify as – please specify |  |  |  |  |  |  |  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **6. Sexual orientation** |
| **Sexual orientation** | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| Bisexual | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Gay or lesbian | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Heterosexual | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Other – please specify |  |  |  |  |  |  |  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **7. Language – what is your main language?** |
| **Language** | **Person 1** | **Person 2** | **Person 3** | **Person 4** | **Person 5** | **Person 6** | **Person 7** |
| English | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| French  |  |  |  |  |  |  |  |
| Italian  |  |  |  |  |  |  |  |
| Polish  |  |  |  |  |  |  |  |
| Portuguese  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Somalian  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Spanish  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Twi  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Yoruba  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Other – please specify |  |  |  |  |  |  |  |
| Prefer not to say | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |