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Diversity Monitoring



Diversity Monitoring

As an employer, it is the aim of the Scottish Government to become an exemplar in the field of diversity and to broadly reflect the communities we serve. We also want to ensure that our job opportunities are open to all. To help us achieve this, it is important that we obtain accurate and complete data from every job applicant and employee.

Although you do not have to provide this information, it would be extremely helpful if you do so, even if you only feel able to provide some of the information requested. All information gathered will be held in the strictest confident, accessible only to a restricted number of Human Resources and other staff who require it, and in line with the principles of data protection legislation. It will be used only for the purposes of monitoring and collated data will never be published where there are numbers less than five to ensure that individuals cannot be identified.

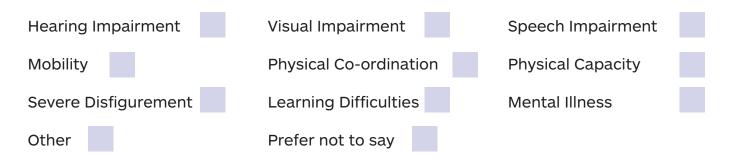
Date of Birth					
National Identity (please tick the box that applies)					
Scottish	English	Welsh	Irish		
British	Other	Prefer not to say			
If other, how would you describe your national identify?					
Please select one category only, indicating the category that best describes your ethnic origin.					
White British		Any Other White background			
Any Mixed bad	ckground	Indian			
Pakistani		Bangladeshi			
Chinese		Any other Asian background			
Caribbean		African			
Any other Blac	ck background	Any other background			
Prefer not to say					

Church of Scotland	d	Roman Catholic			
Buddhist		Hindu			
Jewish		Sikh			
Prefer not to say					
Another Faith, Belief or Religion					
What is your sexual orientation?					
Gay man		Gay woman/lesbian			
Prefer not to say					
If other, please state					
Disability					
Do you have a health condition or disability?					
Has it lasted or is it expected to last 12 months?					
	Buddhist I I I I I I I I I I I I I I I I I I I	Jewish Prefer not to say ? Gay man Prefer not to say			

Please select the religion that best applies to you?

Of the following categories, what best describes the nature of your health condition/disability

Does this have an adverse effect on your day-to-day activities Yes



No



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This document is available on the Transport Scotland website: www.transport.gov.scot Published by Transport Scotland, February 2018

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