**Equalities Monitoring Form**

Theatr Genedlaethol Cymru is committed to equal opportunities and in order to monitor our performance, we ask you to complete this monitoring form. The information given will be kept confidential and will be used for monitoring purposes only. The data is used anonymously for reporting on performance.

|  |  |
| --- | --- |
| **Name:** |  |
| **Production/Project:** |  |
| **Your role:** |  |

|  |  |
| --- | --- |
| **How old are you?** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Choose the option that is most accurate for you:** | | | | | |
| I can speak Welsh |  |  | I don’t speak Welsh |  |  |
| I’m learning Welsh |  |  | I’d prefer not to say |  |  |
| Other |  |  | Specify if you wish ………………………………….. |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your gender?** | | | | | | | | | |
| Male |  | | Female |  | Non-binary | |  | Other |  |
| **Is your gender identity the same as the gender assigned to you at birth?** | | | | | | | | | |
| Yes | | No | | | | I’d prefer not to say | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What is your sexual orientation?** | | | | |
| Heterosexual |  |  | Gay man |  |
| Bisexual |  |  | Lesbian / Gay woman |  |
| Other |  |  | Specify if you wish ………………………………….. | |
| I’d prefer not to say |  |  |  | |

|  |  |  |
| --- | --- | --- |
| **Do you consider yourself to be disabled, D/deaf, or have a long term health condition?** | | |
| The Equality Act 2010 defines a disabled person as someone who has a physical or mental impairment, which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. | | |
| Yes | No | I’d prefer not to say |
| If yes, please note the nature of your disability below, if you wish: | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **What is your nationality?** | | | | | |
| Welsh |  |  | English |  |  |
| British |  |  | Irish (Northern Ireland) |  |  |
| Scottish |  |  | Irish |  |  |
| Other |  |  | Specify if you wish ………………………………….. |  |  |
| I’d prefer not to say |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What is your ethnicity?** | | | | |
| **White:** |  |  | **Asian** |  |
| Any White background |  |  | Indian |  |
| **Mixed / Multiple ethnic groups:** |  |  | Pakistani |  |
| White and Black Caribbean |  |  | Bangladeshi |  |
| White and Black African |  |  | Chinese |  |
| White and Asian |  |  | Any other Asian background |  |
| Any other Mixed / Multiple ethnic background |  |  | Specify if you wish ………………………………….. | |
| Specify if you wish ………………………………….. | |  |  | |
| **Black:** |  |  | **Other ethnic group** |  |
| Caribbean |  |  | Arab |  |
| African |  |  | Gypsy or Irish Traveller |  |
| Any other Black background |  |  | Any other ethnic group |  |
| Specify if you wish ………………………………….. | |  | Specify if you wish ………………………………….. |  |
| **I’d prefer not to say** |  | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Religion or belief** | | | | | |
| No religion |  |  | Christianity (all denominations) |  |  |
| Buddhist |  |  | Hindu |  |  |
| Jewish |  |  | Muslim |  |  |
| Sikh |  |  | I’d prefer not to say |  |  |
| Other |  |  | Specify if you wish ………………………………….. |  |  |