

**OFFICE OF THE POLICE AND CRIME COMMISSIONER
DIVERSITY MONITORING FORM**

DECLARATION

The information requested below is the minimum necessary to enable OPCC to meet their legal obligation to monitor their workforce. The data is necessary to help eliminate unlawful discrimination, promote equality of opportunity and promote good working relations between different groups.

The information **will**:

- be used for monitoring purposes only
- be securely retained by the OPCC
- be processed in accordance with the **Data Protection Act 1998**
- only be processed by a small number of authorised people.

PERSONAL DETAILS

GENDER	FEMALE				MALE								
GENDER IDENTITY	Please indicate if you consider yourself to be Transgender. <i>(For monitoring purposes the term Transgender is used to include: Hermaphrodite/Intersex, Transgenderist, Transsexual, Transvestite)</i>								Y				
									N				
MARITAL STATUS	IN CIVIL PARTNERSHIP				CO-HABITING				DIVORCED				
	MARRIED		SEPARATED		SINGLE		WIDOWED						
AGE	16 - 17		18 - 24		25 - 34		35 - 44		45 - 54		55 - 64		65 +
WORKING PATTERN	FULL - TIME				Part - Time				Job - Share				

DISABILITY / IMPAIRMENT

Please indicate below* if you consider yourself to have a disability within the meaning of the Equality Act 2010?

NOTE: The Act defines disability as a 'physical or mental impairment, which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities'.

Should you elect the option 'Prefer not to say', this **will not** be interpreted as being indicative of a disability

*Yes		*No		Prefer not to say	
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