**Equalities Monitoring Form **

This form is for the specified purpose of the monitoring of our services, to ensure that Lewisham Council is being fair and inclusive. We need to know who our customers are to check that everyone in the borough is accessing the services they are entitled to, and that nobody is discriminated against unlawfully. All questions on the form are voluntary and you do not have to answer them. Any information that you do choose to provide on this form will be treated **confidentially**.

The Council may further process the information collected where it believes there is a duty to protect the vital interests of those who may be directly affected. Please note that the Council will only ever do this in line with its responsibilities under the Data Protection Act 1998, notably the requirements laid out in Schedules 2 & 3 of the Act.

**How would you describe yourself?**

|  |  |
| --- | --- |
| **Age**  | **□ Under 18**  |
| **□ 18‐65**  |
| **□ Over 65**  |
| **□ Prefer not to say**  |

|  |  |
| --- | --- |
| **Ethnicity**  | **□ White British background** |
| **□ Other white background**  |
| **□ Black and minority ethnic background**  |
| **□ Prefer not to say**  |

|  |  |
| --- | --- |
| **Disability**Are you disabled?  | **□ Yes** |
| **□ No**  |
| **□ Prefer not to say**  |

|  |  |
| --- | --- |
| **Gender**  | **□ Male**  |
| **□ Female** |
| **□ Prefer not to say**  |

|  |  |
| --- | --- |
| **Transgender** Is your gender identity different from the gender you were assumed to be at birth?  | **□ Yes**  |
| **□ No**  |
| **□ Prefer not to say**  |

|  |  |
| --- | --- |
| **Sexual Orientation**Are you: | **□ Straight/heterosexual**  |
| **□ Lesbian/gay or bisexual**  |
| **□ Prefer not to say**  |

|  |  |
| --- | --- |
| **Religion or Belief**Do you have a religion or belief?  | **□ Yes** |
| **□ No**  |
| **□ Prefer not to say**  |
| **□ 18‐65**  |