***Strictly Private and Confidential***

**Diversity Monitoring Questionnaire**

***This form will not be used in the selection process.***

|  |  |  |
| --- | --- | --- |
| **Candidate reference:** |  | *For chambers use only* |

Westgate wishes to ensure that we are able to recruit, develop and retain the most talented barristers, pupils and staff to our chambers. We value the diversity of backgrounds, skills and experiences found in our chambers, and actively promote an inclusive culture where all our members and staff are able to flourish. As part of meeting our commitments to equality and diversity, Chambers collects and (after a recruitment process has ended) analyses statistical information on all those that apply for positions here. This enables us to ensure that we continue to attract and select our pupils and members solely on the basis of talent and their potential to succeed.

The information that you are asked to provide in the section below will be treated in the strictest confidence. The information requested relates to those areas covered in the Bar Standard Board’s Equality Rules and Guidance. It will be held confidentially by the Equality and Diversity Officer and Senior Clerk and will be used solely for statistical monitoring purposes and will not be used in the selection process.

You are not obliged to answer all or any of the questions but in providing this information you will help us to ensure that our recruitment is fair and objective for all.

1. **Please tick a box below to indicate whether you identify as:**

Male               ☐

Female              ☐

Non-binary        ☐

Prefer not to say                 ☐

Other                    ☐

1. **From the list of age bands below please tick a box to indicate the category that includes your current age in years:**

20-21

22-23

24-25

26-27

28-30

31-35

36-40

41-45

46-50

51-55

56-65

66+

Prefer not to say

1. **What is your ethnic group? Choose one of the groups below to indicate your ethnic group (please tick one box only):**

White: British/English/Northern Irish/Scottish/Welsh

White: Irish

White: Gypsy or Irish Traveller

White: any other background

Caribbean

African

White/Black Caribbean

White/Black/African

White/Asian

Black/African

Black/Caribbean

Black: other Black/African/Caribbean background

Other mixed/multiple ethnic background

Indian

Pakistani

Bangladeshi

Chinese

Asian: other Asian background

Arab

None of the above

Prefer not to say

1. **Do you consider yourself to have a disability?**

The Equality Act 2010 defines a person as having a disability if he or she has a physical or mental impairment, which has a substantial long term, adverse effect on his or her ability to carry out normal day‐to‐day activities. “Long term” means that the impairment is likely to or has lasted for 12 months or more.

1. **Do you consider yourself to have a disability according to the definition above?**

Yes

No

Prefer not to say

1. **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?**

Yes, limited a lot

Yes, limited a little

No

Prefer not to say

1. **What is your sexual orientation?**

Bisexual

Gay man

Gay woman/lesbian

Heterosexual/straight

Other

Prefer not to say

1. **What is your religion or belief?**

No religion or belief

Buddhist

Christian (all denominations)

Hindu

Jewish

Muslim

Sikh

Any other religion

Prefer not to say

1. **What is your socio‐economic background?**
2. **If you went to university (to study a BA, BSc course or higher) were you part of the first generation of your family to do so?**

Yes

No

Did not attend university

Prefer not to say

1. **Did you mainly attend a state or fee paying school between the ages of 11‐18?**

State

Fee paying

Prefer not to say

1. **If you attended a fee paying school, did you ever receive any kind of financial award to cover 50% or more of the school fees?**

Yes

No

Prefer not to say

1. **Do you have caring responsibilities?**
2. **Are you a primary carer for a child or children under 18?**

Yes

No

Prefer not to say

1. **Do you look after or give any help or support to family members, friends, neighbours or others because of either: i) Long term physical or mental ill‐health/disability; ii) Problems related to old age?** (Do not count anything you do as part of your paid employment).

No

Yes, 1-19 hours a week

Yes, 20-49 hours a week

Yes, 50 or more hours a week

Prefer not to say

**Please return this form with your application to** [**cwilson@westgate-chambers.co.uk**](mailto:cwilson@westgate-chambers.co.uk)