

OPTIONAL EQUALITY AND DIVERSITY QUESTIONS

ARC NWC needs your help and co-operation to enable it to do this, but filling in this form is voluntary.

We ask for this information as we would like to check that we are reaching and working with a wide range of people in the north west area. It helps us to target groups we have not engaged in our future work.

We may also use the information to report to NIHR (National Institute for Health Research) when evaluating how effective we have been at engaging members of the public with our work. Any information used will be anonymized.

Gender

Man Woman Intersex Non-binary Prefer not to say

If you prefer to use your own term, please specify here:

Age

16-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59
60-64 65-70 71-75 76-80 80+ Prefer not to say

Are you married or in a civil partnership? Yes No

Cohabiting in a relationship Prefer not to say

What is your ethnicity?

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

White

English Welsh Scottish Northern Irish Irish

British Gypsy or Irish Traveller Prefer not to say

Any other white background, please state:

Mixed/multiple ethnic groups

White and Black Caribbean White and Black African White and Asian Prefer not to say

Any other mixed background, please specify here:

Asian/Asian British

Indian Pakistani Bangladeshi Chinese Prefer not to say

Any other Asian background, please specify here:

Black/ African/ Caribbean/ Black British

African Caribbean Prefer not to say

Any other Black/African/Caribbean background, please specify here:

Other ethnic group

Arab Prefer not to say

Any other ethnic group, please specify here:

What is your sexual orientation?

Heterosexual Gay Lesbian Bisexual
Prefer not to say

If you prefer to use your own term, please specify here:

What is your religion or belief?

No religion or belief Buddhist Christian Hindu Jewish Muslim Sikh
Prefer not to say If other religion or belief, please specify:

Do you have caring responsibilities?

None Primary carer of disabled adult (18 and over) Primary carer of older person/people (65 and over)
Primary carer of a child/children (under 18) Primary carer of disabled child/children
Secondary carer (another person carries out the main caring role) Prefer not to say

Do you consider yourself to have a disability or health condition?

Yes No Prefer not to say

What is the effect or impact of your disability or health condition

Please return the completed form to Ruth Ball, 2nd Floor, Block B, Waterhouse Building, 1-5 Brownlow Street, Liverpool, L69 3GL. Email: arcnwc@liverpool.ac.uk. PLEASE MARK 'Strictly Confidential'.

By registering at the University of Liverpool as an ARC NWC Public Adviser, you understand that the University is collecting, storing, using and disclosing data about you for any purposes connected with your role as an ARC NWC Public Adviser. The ARC NWC administration requirements are shared between three Universities (Lancaster University, University of Central Lancashire and University of Liverpool). We may need to share your details with relevant ARC NWC colleagues at these universities solely for the purposes of ARC NWC related work or operations. When any requests are made such that we have to process data about you, from any of these named organisations, management of your data will be in accordance with data protection legislation and compliant with any data security requirements of the contractual arrangements between the partners.

The General Data Protection Regulation establishes a framework within which information about individuals can be legally collected, stored, used and disclosed

Further details in ARC NWC's Privacy Policy <https://arc-nwc.nihr.ac.uk/privacy-policy/>

Any queries regarding your data management please email arcnwc@liverpool.ac.uk