**FORM C: DIVERSITY MONITORING FORM**

**This should be returned to:** **diversity@lawscot.org.uk** **. Any applicant who returns Form A and/or Form B to this email address should be aware that the Society will not pass these forms on to the employing organisation.**

The data collected in Form C will not be available to those involved in the short-listing, interview or selection process. Instead, it is being held by the Law Society of Scotland and the Scottish Government – in accordance with their Data Protection Policies and the privacy information at the end of this form – and collated information will be shared as part of monitoring procedures with the Fund’s Management Board.

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| **At which organisation are you applying for a traineeship? (Please fill in this form for each funded traineeship you apply for)** |  |

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| **What is your date of birth?** |                      |

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| **Sex** | Male [ ]  Female [ ]  Prefer not to say [ ]  |
| **Is the gender you identify with the same as your sex registered at birth?** | Male [ ]  Female [ ]  Enter gender identity                     |

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| **Sexual orientation** |  |
| Heterosexual/StraightGay manGay woman/lesbianBisexual Prefer not to sayOther please state                 |  [ ]   [ ]  [ ]   [ ]   [ ]  |

|  |  |
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| **Ethnic origin: (please tick appropriate group)** |  |
| Arab, Arab Scottish or Arab BritishAsian, Asian Scottish or Asian BritishBangladeshi, Bangladeshi Scottish or Bangladeshi BritishBlack, Black Scottish or Black British (African)Black, Black Scottish or Black British (Caribbean)Chinese, Chinese Scottish or Chinese BritishIndian, Indian Scottish or Indian BritishJewishMixed or multiple ethnic groupsPakistani, Pakistani Scottish or Pakistani BritishPolish Prefer not to saySikhWhite – Other BritishWhite – Scottish White – IrishOther please state                 |  [ ]   [ ]  [ ]   [ ]   [ ]   [ ]   [ ]  [ ]   [ ]  [ ]  [ ]   [ ]  [ ]  [ ]  [ ]  [ ]  |

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| **Section 6 of the Equality Act 2010 sets out the circumstances in which a person is considered disabled. It says:****A person (P) has a disability if:**1. **P has a physical or mental impairment, and**
2. **The impairment has a substantial and long-term adverse effect on P’s ability to carry out normal day-to-day activities.**

**Do you have a disability?** | [ ]  Yes [ ]  No [ ]  Prefer not to say |
| **Please give details** |   |

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| **What type of school did you attend when you were aged about 14?** |  |
| A state-run or state-funded school that was not selective A state-run or state-funded school that was selective on academic, faith or other groundsAn independent or fee-paying school (with a bursary)An independent or fee-paying school (without a bursary)A school outside the UKPrefer not to say |  [ ]   [ ]  [ ]   [ ]    [ ]  [ ]  |

|  |  |
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| **What was the occupation of the main income earner in your family when you were about 14?** |  |
| High (e.g. managerial, administrative or professional occupation)Intermediate (small employers, lower supervisory and technical occupations)Routine or manual Long-term unemployedRetiredPrefer not to sayOther |  [ ]   [ ]  [ ]  [ ]   [ ]   [ ]  [ ]  |

**Diversity monitoring**

As part of the traineeship support scheme the data will be disclosed in an anonymised and aggregated format for statistical analysis and research including preparing reports on its findings and shared with the Scottish Government. The Law Society of Scotland and the Scottish Government will be the data controllers.

DECLARATION:

I can confirm that the information supplied is a true reflection of myself.

Name:

Signed:

Date: