Hull City Tigers Ltd and SMC Ltd intent to meet the aims and commitments defined in the Company’s equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary. All forms will be separated from applications and will not be used in conjunction with the selection process.

The information you provide will stay confidential, and be stored securely and limited to only staff in the organisation’s Human Resources Department.

Please return the completed form with your application or alternatively in an envelope marked ‘Strictly confidential’ to: HR Department, Hull City Tigers/SMC, KCOM Stadium, West Park, Hull, HU3 6HU or recruitment@hulltigers.com

**Gender**  
Male □  Female □  Transgender □  Prefer not to say □

**Are you married or in a civil partnership?**  
Yes □  No □  Prefer not to say □

<table>
<thead>
<tr>
<th>Age</th>
<th>16-24</th>
<th>25-29</th>
<th>30-34</th>
<th>35-39</th>
<th>40-44</th>
<th>45-49</th>
<th>Prefer not to say</th>
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**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**
British □  Irish □  Gypsy or Irish Traveller □  Prefer not to say □
Any other white background, please write in:

**Mixed/multiple ethnic groups**
White and Black Caribbean □  White and Black African □  White and Asian □
Prefer not to say □  Any other mixed background, please write in:

**Asian/Asian British**
Indian □  Pakistani □  Bangladeshi □  Chinese □  Prefer not to say □
Any other Asian background, please write in:
Black/ African/ Caribbean/ Black British
African ☐ Caribbean ☐ Prefer not to say ☐
Any other Black/African/Caribbean background, please write in:

Other ethnic group
Arab ☐ Prefer not to say ☐ Any other ethnic group, please write in:

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 on your ability to give your best at work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

What is your sexual orientation?
Heterosexual ☐ Gay woman ☐ Gay man ☐ Bisexual ☐
Prefer not to say ☐ If other, please write in:

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 write in:

What is your current working pattern?
Full-time ☐ Part-time ☐ Prefer not to say ☐

What is your flexible working arrangement?
None ☐ Flexi-time ☐ Staggered hours ☐ Term-time hours ☐
Annualised hours ☐ Job-share ☐ Flexible shifts ☐ Compressed hours ☐
Homeworking ☐ Prefer not to say ☐ If other, please write in:

Do you have caring responsibilities? If yes, please tick all that apply
None ☐ Primary carer of a child/children (under 18) ☐
Primary carer of disabled child/children ☐
Primary carer of disabled adult (18 and over) ☐ Primary carer of older person ☐
Secondary carer (another person carries out the main caring role) □
Prefer not to say □

THANK YOU FOR COMPLETING THIS FORM