TOWN AND CINQUE PORT OF HYTHE



Hythe Town Council
Oaklands, Stade Street, Hythe, CT21 6BG
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admin@hythe-tc.gov.uk

01303 266152

Hythe Town Council wants to meet the aims and commitments set out in its 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.

Of via email to, Clerk@hythe-tc.gov.uk
Gender Man □ Woman □ Intersex □ Non-binary □ Prefer not to say □ If you prefer to use your own term, please specify here
Are you married or in a civil partnership? Yes □ No □ Prefer not to say □
Age 16-24 □ 25-29 □ 30-34 □ 35-39 □ 40-44 □ 45-49 □ 50-54 □ 54 □ 55-59 □ 60-64 □ 65+ □ 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
<pre>White English</pre>
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 \square No \square Prefer not to say \square
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 □ 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
Full-time Part-time Prefer not to say
What is your flexible working arrangement? None
Do you have caring responsibilities? If yes, please tick all that apply None