



Faculty of Dental Surgery
The Royal College of Surgeons of England

Diversity Monitoring Form Licentiate in Dental Surgery (LDS)

The Royal College of Surgeons of England (RCSEng) is committed to ensuring equality of opportunity and promoting diversity for all existing and potential staff, affiliates, members, fellows, council members, contractors and visitors in accordance with the relevant statutory requirements. To help us to monitor the effectiveness of our policies and practices we ask you to complete this monitoring form. The information will be treated in the strictest confidence under the Data Protection Act 1998 and will be used to produce statistics to enable the RCSEng to check a variety of processes to ensure equality and address issues as they arise.

1. AGE					
20-30	<input type="checkbox"/>	41-50	<input type="checkbox"/>	61-65	<input type="checkbox"/>
31-40	<input type="checkbox"/>	50-60	<input type="checkbox"/>	65+	<input type="checkbox"/>

2. DISABILITY (A disabled person is someone who has an impairment, experiences externally imposed barriers or self-identifies as a disabled person.)			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

3. RACIAL ORIGIN					
White British	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>
Irish	<input type="checkbox"/>	African	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Chinese	<input type="checkbox"/>		
Other Asian <i>(please specify)</i>		Other mixed <i>(please specify)</i>			

4. GENDER			
Female	<input type="checkbox"/>	Male	<input type="checkbox"/>

5. ETHNICITY (Religion/Belief)					
Christian	<input type="checkbox"/>	Hindu	<input type="checkbox"/>	None	<input type="checkbox"/>
Muslim	<input type="checkbox"/>	Sikh	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Jewish	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>	Other <i>(please specify)</i>	

6. SEXUAL ORIENTATION					
Heterosexual	<input type="checkbox"/>	Gay man	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>	Gay woman/Lesbian	<input type="checkbox"/>		