## FOSTERING DIVERSITY IN SENIOR CHURCH APPOINTMENTS

The General Synod report "Talent & Calling" required that monitoring on diversity and churchmanship was carried out on all candidates within the preferment system. In order to monitor whether senior appointments in the Church broadly reflect the diversity of clergy and to assist us in monitoring our selection and development policies, we would be grateful if you would provide the following information.

| Gender Female   | In order for us to monitor please put an X in the relevant box. |               |                          |         |                 |  |  |
|---|---|---------------|--------------------------|---------|-----------------|--|--|
| Ethnicity  ASIAN BLACK MIXED WHITE CHINESE / OTHER  Asian British African White/Asian British Chinese  Bangladeshi Black British White/Black African Irish Any Other  Indian Caribbean White/Black Caribbean Other  Pakistani Other Other  Asian Other  No Disability  Do you have a disability as defined by the Equality Act 2010?  | Gender  | Female        | Male —                   | ]       |                 |  |  |
| Ethnicity  ASIAN BLACK MIXED WHITE CHINESE / OTHER  Asian British African White/Asian British Chinese  Bangladeshi Black British White/Black African Irish Any Other  Indian Caribbean White/Black Caribbean Other  Pakistani Other Other  Asian Other  No Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   WHITE CHINESE / OTHER  CHINESE / OTHER | Date of Birth   |               |                          |         |                 |  |  |
| ASIAN BLACK MIXED WHITE CHINESE / OTHER  Asian British African White/Asian British Chinese  Bangladeshi Black British White/Black African Irish Any Other  Indian Caribbean White/Black Caribbean Other  Pakistani Other Other  Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No  | Traditional Catholic  |               | Conservative Evangelical |         | Other           |  |  |
| Asian British African White/Asian British Chinese  Bangladeshi Black British White/Black African Irish Any Other  Indian Caribbean White/Black Caribbean Other  Pakistani Other Other  Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   | Ethnicity   |               |                          |         |                 |  |  |
| Bangladeshi Black British White/Black African Irish Any Other   | ASIAN   | BLACK         | MIXED                    | WHITE   | CHINESE / OTHER |  |  |
| Indian Caribbean White/Black Caribbean Other  Pakistani Other Other  Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   | Asian British   | African       | White/Asian              | British | Chinese         |  |  |
| Pakistani Other Other  Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   | Bangladeshi   | Black British | White/Black African      | Irish   | Any Other       |  |  |
| Pakistani Other Other  Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   |   |               |                          |         |                 |  |  |
| Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No  | Indian  | Caribbean     | White/Black Caribbean    | Other   |                 |  |  |
| Asian Other  Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No  |   |               |                          |         |                 |  |  |
| Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   | Pakistani   | Other         | Other                    |         |                 |  |  |
| Disability  Do you have a disability as defined by the Equality Act 2010?  Yes No   |   |               |                          |         |                 |  |  |
| Do you have a disability as defined by the Equality Act 2010?  Yes No   | Asian Other   |               |                          |         |                 |  |  |
| Yes No  | Disability  |               |                          |         |                 |  |  |
|   | Do you have a disability as defined by the Equality Act 2010?   |               |                          |         |                 |  |  |
| Signed: Date:   | Yes   | No 🗆          |                          |         |                 |  |  |
|   | Signed:   |               |                          | Date:   |                 |  |  |

Thank you for your time in completing this form.

A typed name will be sufficient as an electronic signature.