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**Equal Opportunities Form**

Film London is supported by the BFI, the Mayor’s Office/GLA and the Arts Council England and is committed to positive policies to promote equal opportunity in the development and growth of London’s film industry.

Monitoring is recommended by the Equality and Human Rights Commission and the CBI. All information will be treated as confidential and is being collated anonymously.

We would appreciate it if you would answer the questions below.

**Please tell us your gender  
 Male**

**Female**

**Prefer to self-describe** ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­

**Prefer not to say**

**Please tell us if your gender is different   
from the sex you were assigned at birth**

**No**

**Yes**

**Prefer not to say**

**Please choose one option that best describes  
your ethnic group or background**

**White** White – British (English/Scottish/Welsh) / Northern Irish   
 White – Irish   
 White – any other background ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Asian or Asian British** Asian or Asian British – Bangladeshi   
 Asian or Asian British – Indian   
 Asian or Asian British – Pakistani   
 Asian or Asian British – any other background ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
**Black or Black British**  
 Black or Black British – African

Black or Black British – Caribbean   
Black or Black British – any other background ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dual Heritage** Dual Heritage – White and Asian   
 Dual Heritage – White and Black African   
Dual Heritage – White and Black Caribbean   
 Dual Heritage – any other background ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Arab**

**Chinese**

**Any other ethnic group or background** ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Prefer not to say**

**Do you consider yourself to have a disability?**

**Yes**  **No**  **Prefer not to say**

The Equality Act of 2010 defines disability as “a physical or mental impairment with long-term, substantial adverse effects on ability to perform day-to-day activities”.

**Please tell us your age within these ranges**

**Under 16**  **16-19**  **20-34**  **35-49**  **50-64**  **65+**   
**Prefer not to say**

**Please tell us your sexual orientation**

**Bisexual**

**Gay / Lesbian**

**Heterosexual / Straight**

**Prefer to self-describe** ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­

**Prefer not to say**

**Please tell us your religion or belief**

**Buddhist**

**Christian**

**Hindu**

**Jewish**     
**Muslim**     
**Sikh**     
**No religion**     
**Prefer to self-describe** ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­

**Prefer not to say**

**Thank you for taking the time to complete this form**