VACMA Equalities Monitoring Form

Why are we asking for you to complete this form?

Filling out the Equalities Monitoring Form helps us learn more about the diversity of our applicants and fulfil out reporting requirements to Creative Scotland.

Your responses help us see if there are any gaps or areas where we can do better. This way, we can ensure that more people can benefit from our funding. Your contribution to this work is crucial in making a positive impact.

In this form we ask questions regarding age, sex, ethnicity, disability, and sexual orientation. This covers some of the 'protected characteristics' in The Equality Act 2010. We also include questions on gender identity, socio-economic background and Gaelic language.

If you do not know some of the information or if you prefer not to provide it, you can fill in the 'Prefer not to say' box.

The information you provide will be used to create aggregated statistics and reports for sharing with Creative Scotland. These will help Creative Scotland support groups that are underrepresented, improve equal opportunities and prevent discrimination. Your input will also help us and Creative Scotland improve our services and meet reporting requirements.

Any statistics and reports will be anonymised before they are shared with Creative Scotland and all data is managed confidentially, in accordance with GDPR and Data Protection laws.

Alternative Formats, Languages and Access Support

Creative Scotland is committed to offering clear and accessible application processes and programmes that are open to everyone. This information is available in alternative formats on request, including translations. Access support is available for disabled applicants who need help completing this form.

For further information please contact: **enquiries@creativescotland.com**

Please now tell us about yourself. Please mark an X against the relevant boxes, unless asked otherwise.

Age

How old are you?

16-24 years	
25-44 years	
45-65 years	
65+ years	
Prefer not to say	

Disability

Do you have a physical or mental health condition or illness lasting or expected to last 12 months or more?

Yes	
No	
Prefer not to say	

If yes, does this condition or illness affect you in any of the following areas? Please select all that apply

Vision (for example blindness or partial sight)	
Hearing (for example deafness or partial hearing)	
Mobility (for example walking short distances or climbing stairs)	
Dexterity (for example lifting or carrying objects, using a keyboard)	
Learning or understanding or concentrating	
Stamina or breathing or fatigue	

Socially or behaviourally (for example associated with Autism or ADHD)	
Other (please write in)	
Prefer not to say	

Ethnicity

What is your ethnic group? Please indicate which best describes your ethnic group or background.

White	1. Scottish	
	2. Other British	
	3. Irish	
	4. Gypsy/Traveller	
	5. Polish	
	6. Any other white ethnic group (please write in)	
Mixed or multiple ethnic groups	1. Any Mixed or Multiple ethnic groups (please write in)	
Asian, Asian Scottish or Asian British	1. Pakistani, Pakistani Scottish or Pakistani British	
	2. Indian, Indian Scottish or Indian British	
	3. Bangladeshi, Bangladeshi Scottish or Bangladeshi British	
	4. Chinese, Chinese Scottish, or Chinese British	
	5. Any other Asian (please write in)	
African	1. African, African Scottish or African British	
	2. Any other African (please write in)	
Caribbean or Black	1. Caribbean, Caribbean Scottish or Caribbean British	

	2. Black, Black Scottish or Black British	
	3. Any other Caribbean or Black (please write in)	
Other ethnic group	1. Arab, Arab Scottish or Arab British	
	2. Any other ethnic group (please write in)	
	Prefer not to say	

Gender Identity

How would you describe you gender identity?

Man	
Woman	
In another way (if you would like to, please tell us what other words you would use, e.g. intersex, non-binary, gender-fluid)	
Prefer not to say	

Sex

What is your sex?

('Sex' relates to the sex recorded on your birth certificate or Gender Recognition Certificate)

Female	
Male	
Prefer not to say	

Do you consider yourself to be a trans person?

('Trans' is a term used to describe people whose gender is not the same as the sex they were assigned at birth.)

Yes	
No	
Prefer not to say	

Sexual Orientation

Which of the following options best describes your sexual orientation?

Heterosexual/Straight	
Gay/Lesbian	
Bisexual	
Other sexual orientation (please write in)	
Prefer not to say	

Gaelic Language

Do you speak Gaelic?

Yes	
No	

Career Stage

How many years have you been practising as an artist or maker?

0-5 years	
More than 5 years	

Socio-Economic Background

Please tell us about the occupation of your main household earner when you were aged 14. If this question does not apply to you (because, for example, you were in care at this time), you can indicate this below:

Modern professional occupations such as: teacher, nurse, physiotherapist, social worker, musician, police officer (sergeant or above), software designer.	
Clerical and intermediate occupations such as: secretary, personal assistant, clerical worker, call centre agent, nursery nurse.	
Senior managers or administrators (usually responsible for planning, organising and co-ordinating	

work, and for finance) such as: finance manager, chief executive.	
Technical and craft occupations such as: motor mechanic, plumber, printer, electrician, gardener, train driver.	
Semi-routine manual and service occupations such as: postal worker, machine operative, security guard, caretaker, farm worker, catering assistant, sales assistant.	
Routine manual and service occupations such as: HGV driver, cleaner, porter, packer, labourer, waiter/waitress, bar staff.	
Middle or junior managers such as: office manager, retail manager, bank manager, restaurant manager, warehouse manager.	
Traditional professional occupations such as: accountant, solicitor, medical practitioner, scientist, civil / mechanical engineer.	
Long term unemployed (claimed Jobseeker's Allowance or earlier unemployment benefit for more than a year).	
Retired	
This question does not apply to me	
I don't know	
I prefer not to say	

Thank you for completing this form.

Please now submit this by email along with your application form.

Please note: this Equalities Monitoring Form will have no bearing on your application for funding.