|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| * **Sex** | | | | | |
| Male | Female | | | | Prefer not to say |
| * **Trans (16 years or over)** | | | | | |
| Trans is a term used to describe people whose gender identity is not the same as the sex they were registered with at birth. Do you consider yourself to be trans, or have a trans history? | | | | | |
| Yes | No | | | | Prefer not to say |
| If you would like to, please describe your trans status (for example, non-binary, trans man, trans woman) | | | | | |
| * **Ethnic origin** | | | | | |
| **A - White** | | | | | |
| Scottish | Irish | | | | Other British |
| Any other white background (please specify) | | | | | |
| **B - Mixed** | | | | | |
| Any mixed background (please specify) | | | | | |
| **C - Asian, Asian Scottish or Asian British** | | | | | |
| Bangladeshi | | Chinese | | Indian | |
| Pakistani | | Any other Asian background (please specify) | | | |
| **D - Black, Black Scottish or Black British** | | | | | |
| African | Caribbean | | | | |
| Any other black background (please specify) | | | | | |
| **E - Other ethnic background** | | | | | |
| Any other background (please specify) | | | | | |
| **F – Prefer not to say** | | | | | |
| Prefer not to say | | | | | |
| * **LGB+** | | | | | |
| Bisexual | Gay man | | Gay woman/lesbian | | |
| Heterosexual/straight | Prefer not to say | | Other (specify if you wish) | | |

**Please continue questions on the next page**

|  |  |  |  |
| --- | --- | --- | --- |
| * **Religion** | | | |
| Buddhist | Church of Scotland | Hindu | |
| Jewish | Muslim | Other Christian | |
| Roman Catholic | Sikh | Not applicable/None | |
| Another religion (please specify) | | Prefer not to say | |
| * **Age** | | | |
| Under 25 | 25-34 | 35-44 | |
| 45-54 | 55+ | Prefer not to say | |
| * **Disability** | | | |
| The Equality Act 2010 defines a disabled person as someone who has "A physical or mental impairment which has a substantial and adverse long-term effect on their ability to carry out normal day to day activities". | | | |
| Taking this statement into account, do you regard yourself as a disabled person? | | | |
| Yes | No | | Prefer not to say |