

**TAYSIDE POLICE EQUALITY SCHEME 2010-2013
CONSULTATION QUESTIONNAIRE**

1. Have you had reason to contact Tayside Police for anything over the past three years? If so, how did you find the experience?

Very good Good OK Poor Very Poor

Comments....

2. Would you feel confident in approaching Tayside Police officers and staff if you needed to?

Yes No Not sure

Comments...

3. Have you been a victim of hate incident or crime due to your actual or perceived race, disability, religion or sexual orientation?

Yes No Not sure

If so did you report it to Tayside Police? Yes No

Were you satisfied with the response? Yes No

Comments...

If you did not report it, why not?

Comments...

4. What improvements, related to Tayside Police service delivery or employment, have you noticed or experienced over the past three years?

Comments....

5. What are the main issues and concerns that affect you and/or your community that you would like Tayside Police to address within its Equality Scheme Action Plan for the next 3 years.

Comments....

6. Any other comments or suggestions to help improve:

a The way we provide our services

Comments...

b The way we recruit, develop or treat our staff

Comments...

If you would like to receive a copy of our Equality Scheme, or be involved in relevant consultations in the future, please provide your contact details and your preferred method and format for receiving the document or communication.

Name:

Address:

Telephone:

Email:

Preferred method:

Preferred alternative format:

**EQUALITY & DIVERSITY MONITORING FORM
SELF-DEFINED CLASIFICACION CATEGORIES**

Tayside Police is committed to equality of opportunity. We recognise the value of involving and consulting as wide a range of people as possible. To assist us to monitor the effectiveness of our involvement and consultation strategy, we would encourage you to complete this monitoring form. **You can choose to answer all or just some of the questions. No names or addresses are required.** The information you provide will be treated as sensitive data under the Data Protection Act 1998. **Thank you in advance for your help.**

Please ✓ the relevant box in each section, or complete details as appropriate

Gender

Male Female

Do you currently or have you previously considered yourself as transgender?

Yes No Choose not to disclose

Relationship Status

Single Married/Civil Partnership Partner Choose not to disclose

Age

16 – 24 25 – 34 35 – 44 45 – 54
55 – 64 65 + Choose not to Disclose

Do you consider yourself to have a disability?

Yes No Choose not to Disclose

Ethnic and Cultural Origin

Please choose one section A to E, then tick the appropriate box or give details to indicate your cultural background

A. White

Scottish English Welsh Irish

Other White British (please state) _____

Other White Background (please state) _____

B. Mixed

Please state _____

Ethnic and Cultural Origin cont'd

C. Asian, Asian Scottish, Asian English, Asian Welsh, Asian Irish or other Asian British

Indian Pakistani Bangladeshi Chinese

Other Asian Background (please state) _____

D. Black, Black Scottish, Black English, Black Welsh, Black Irish or other Black British

Caribbean African

Other Black Background (please state) _____

E. Other Ethnic Background

Please state _____

Religion or Belief

Church of Scotland Roman Catholic

Other Christian (please state) _____

Buddhism Hinduism Islam/Muslim

Judaism/Jewish Sikhism

Other (please state) _____

No Religion or Belief Choose not to Disclose

Sexual Orientation

Bisexual Gay/Lesbian Heterosexual Choose not to Disclose