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| **BrainsCAN is committed to equity and diversity in all aspects of its programs. It welcomes and encourages participation from women, Indigenous persons, persons with disabilities, members of racialized groups/visible minorities, persons of any sexual orientation, persons of any gender identity or gender expression, and others who may contribute to diversification.**  **As part of our commitment to equity and diversity, we collect applicant data to help assess the effectiveness of our recruitment procedures from a diversity perspective. Completion of this survey is voluntary but participation is encouraged. Be assured that those considering your application will not have access to this information during the recruitment and hiring process. Aggregate applicant data will be used by the BrainsCAN’s Equity & Diversity committee and Western’s Equity & Human Rights Services for statistical and assessment purposes.** |
| **Name:** |
| I do not wish to complete the questionnaire. |
| 1. How do you identify your gender?   *Please select the box(es) that apply to you*  Woman;  Man;  Transgender;  Non-binary (Gender Queer);  Gender fluid;  Another (e.g. 2-Spirited, Intersex, etc.). *please specify*  I prefer not to answer at this time |
| 1. How do you identify your sexual orientation?   *Please select the box(es) that apply to you*  Bisexual;  Gay;  Heterosexual;  Lesbian;  Queer;  Questioning/not sure;  Another (e.g. Pansexual, Asexual, etc.). *please specify*  I prefer not to answer at this time |
| 1. Do you self-identify as a member of one of the Indigenous peoples of North America?   Yes ; No .  *If yes, please check the category that best applies to you:*  First Nation/North American Indian;  Métis;  Inuit;  Another (e.g. Kanien’kehaka, Anishinaabe, Treaty #3) *please specify*  I prefer not to answer at this time |
| 1. For the purposes of employment equity, members of racialized groups/visible minorities means persons, other than Indigenous people, who are non-Caucasian in race or non-white in colour. Please note that this question does not refer to the country in which you were born, your citizenship or your religion.   **Do you self-identify as a member of a racialized group/visible minority?**  Yes ; No .  *If yes, please check one box below to indicate the group to which you most self-identify*  Black (e.g. African Black, American Black, Canadian Black, West-Indian Black);  East Asian (e.g. Chinese, Japanese, Korean, Polynesian);  South Asian (e.g. Indian, Pakistani, Sri Lankan, Bangladeshi);  Southeast Asian (e.g. Burmese, Cambodian, Filipino, Malaysian, Laotian, Thai, Vietnamese);  West Asian / Arab (e.g. Syrian, Egyptian, Turkish, Iranian, Israeli, Lebanese);  Mixed race;  Another (*please specify*)  I prefer not to answer at this time |
| 1. Persons with disabilities are persons who have a long-term or recurring physical, mental, sensory, psychiatric or learning impairment. This definition includes persons whose functional limitations owing to their impairment have been accommodated in their current job or workplace.   **Do you self-identify as a person with a disability?**  Yes ; No .  *If yes, please check all boxes that apply to you.*  Coordination/dexterity impairment  Development impairment (e.g., Down's Syndrome)  Hearing impairment – hard of hearing  Hearing impairment – deaf  Learning disability or comprehension impairment (e.g., dyslexia)  Mobility impairment (e.g., need to use a wheelchair)  Non-visible physical impairment (e.g., epilepsy, diabetes)  Psychiatric disability (e.g., severe depression)  Speech impairment  Visual impairment - partially sighted (excluding use of prescription eyewear)  Visual impairment - blind  Another (*please specify*)  I prefer not to answer at this time |
| **Please send your completed questionnaire to brainscan.edi@uwo.ca** |