Employment Equity Questionnaire

The information you provide on this questionnaire will be kept separate from your personnel records and will not become part of them. This questionnaire is available in alternate formats. Please contact the Diversity and Human Rights Advisor at (204) 727-9785 or email diversity@brandonu.ca with any questions or requests.

Return completed forms, in a sealed envelope, to the <u>Diversity and Human Rights Advisor</u> .			
Name or Employee #:	Date:		
Instructions			
At Brandon University, we want to ensure that the material our larger environment. To achieve this goal, we need employees, whether they identify as members of a dethat all employees complete this questionnaire, and reenvelope, to the Diversity and Human Rights Advisor (d the most accurate data possible from all signated group or not. This is why we require eturn it through interoffice mail, in a sealed		
The information collected in this survey will be held in and will only be used for the purpose stated here. You can change the information provided on this form at a 9785 or email diversity@brandonu.ca .	u can identify in more than one group, and you		
We are committed to the principles of the Employment designated groups that have faced, and continue to face: Women, Indigenous People, Racialized People/VisSexual, and/or Gender minoritized persons.	ce, barriers to employment. These five groups		
Under the Federal Contractors Program (FCP), the unit representation of members of the designated groups questionnaire is to comply with the FCP and the Act, a employment and advancement for members of the designation.	in the workforce. The purpose of this and to assist us in removing barriers to		
We ask you to provide either your name or your empl the makeup of our workforce for different types of job Your employee number can be found at the top of you	os, university departments, professorial ranks etc.		
Opt Out of Providing Equity Data			
Answering the questions in this form is voluntary. If y check the box below, fill in your name or employee nureturn it to the Diversity and Human Rights Advisor in whether it is complete or not, is mandatory .	imber and the date at the top of this form, and		
\square I decline to complete the questionnaire.			

1) Indigenous People

Canadian Indigenous people are those who identify themselves as First Nations, Metis or Inuit, and include those with or without treaty status. The Act includes Indigenous/ Aboriginal people as a designated group because they have faced, and continue to face, barriers to employment.

Do you consider yourself to be a Canadian Indigenous/Aboriginal Person?				
□Yes	□No	☐ Decline to answer		
2) Racialized Pe	ople/Visible M	inorities		
in race or non-w	hite in colour. T	ies are people, other than indigenous people, who are non-Caucasian he Act includes racialized people/visible minorities as a designated and continue to face, barriers to employment.		
Do you con	sider yourself t	o be a member of a racialized or visible minority group?		
□Yes	□No	☐ Decline to answer		
3) Women				
The Act includes to employment.	women as a des	signated group because they have faced, and continue to face, barriers		
Do you self	identify as a w	oman?		
□Yes	□No	☐ Decline to answer		
4) People with [Disabilities			
People with disal psychiatric or lea		le who have a long-term or recurring physical, mental, sensory, nt and who		
(b) believ	e that an emplo	o be disadvantaged in employment by reason of that impairment, or yer or potential employer is likely to consider them to be ment by reason of that impairment,		
in their current jo	ob or workplace	tional limitations owing to their impairment have been accommodated. The Act includes people with disabilities as a designated group ntinue to face, barriers to employment.		
Do you con	sider yourself t	o be a person with a disability?		
□Yes	□No	☐ Decline to answer		

5) Sex, Sexual, and/or Gender minoritized perso

The Act includes Sex, Sexual, and/or Gender minoritized people as a designated group because they have faced, and continue to face, barriers to employment.

Do you consider yourself to be a Sex, Sexual, and/or Gender minoritized person?			
□Yes	□No	\square Decline to answer	
6) Do you self-identify with none of the categories above?			
□Yes	∐No	☐ Decline to answer	-

Thank you for taking the time to complete this questionnaire.