



## FFURFLEN MONITRO RECRIWTIO/RECRUITMENT MONITORING FORM

Cesglir y wybodaeth hon am resymau monitro yn unig a ni chaiff ei gweld gan y panel dethol  
This information is collected for monitoring purposes only and is not seen by the selection panel

Manylion personol/Personal details	
Cyfenw/Surname	
Enw(au)/Name(s)	
Teitl dewisol/Preferred title (Mr, Mrs, Miss, Ms, Arall/Other (nodwch))/(please specify)	
Dyddiad Geni/Date of Birth	

Rhywedd/Gender		
<input type="checkbox"/> Benyw/Female	<input type="checkbox"/> Gwryw/Male	<input type="checkbox"/> Gwell gennyf beidio â dweud/Prefer not to say
Os yw'n well gennych ddefnyddio eich term eich hunan, nodwch ef yma/If you prefer to use your own term, please provide it here:		

Cenedligrwydd/Nationality	
A ydych yn breswlydd cyfreithiol yn y DU? Are you a legal resident in the UK?	<input type="checkbox"/> Ydw/ <input type="checkbox"/> Nac ydw <input type="checkbox"/> Yes <input type="checkbox"/> No
A ydych yn destun rheolaeth fewnfudo?/ Are you subject to immigration control?	<input type="checkbox"/> Ydw/ <input type="checkbox"/> Nac ydw <input type="checkbox"/> Yes <input type="checkbox"/> No
A oes cyfyngiadau ar eich preswylfa neu gyflogaeth barhaus yn y DU?/Are there any restrictions on your continued or residence or employment in the UK?	<input type="checkbox"/> Oes/ <input type="checkbox"/> Nac oes <input type="checkbox"/> Yes <input type="checkbox"/> No
Os Oes, nodwch y cyfyngiadau If Yes, please state the restrictions	

Statws Priodasol/Marital Status		
<input type="checkbox"/> Yn briod/Mewn Partneriaeth Sifl <input type="checkbox"/> Married/Civil Partnership	<input type="checkbox"/> Wedi ysgaru <input type="checkbox"/> Divorced	<input type="checkbox"/> Wedi gwahanu <input type="checkbox"/> Separated
<input type="checkbox"/> Sengl <input type="checkbox"/> Single	<input type="checkbox"/> Gweddw <input type="checkbox"/> Widowed	<input type="checkbox"/> Gwell Gennyf Beidio â Dweud <input type="checkbox"/> Prefer not to say

Ystold oedran/Age range			
<input type="checkbox"/> 16 - 24	<input type="checkbox"/> 25 - 29	<input type="checkbox"/> 30 - 34	<input type="checkbox"/> 35 - 39
<input type="checkbox"/> 40 - 44	<input type="checkbox"/> 45 - 49	<input type="checkbox"/> 50 - 54	<input type="checkbox"/> 55 - 59
<input type="checkbox"/> 60 - 64	<input type="checkbox"/> 65+	<input type="checkbox"/> Gwell gennyf beidio â dweud/Prefer not to say	

Cefndir ethnig/Ethnic origin			
Dewiswch un adran i ddangos eich cefndir/Please choose one section to indicate your background			
Asiaidd, Asiaidd Prydeinig/Asian or Asian British			
<input type="checkbox"/> Bangladeshaidd/ Bangladeshi	<input type="checkbox"/> Indiaidd/Indian	<input type="checkbox"/> Tsieineaidd/ Chinese	<input type="checkbox"/> Pacistanaidd/ Pakistani
<input type="checkbox"/> Unrhyw gefndir Asiaidd arall – nodwch/Any other Asian background, please state:			
Du neu Ddu Prydeinig/Black or Black British			
<input type="checkbox"/> Affricanaidd/African	<input type="checkbox"/> Caribïaidd/ Caribbean	<input type="checkbox"/> Somaliaidd/Somali	
<input type="checkbox"/> Unrhyw gefndir Du arall – nodwch/Any other Black background, please state:			
Grŵp ethnig arall/Other ethnic group			
<input type="checkbox"/> Arabaidd/Arab			
<input type="checkbox"/> Unrhyw grŵp ethnig arall – nodwch/Any other ethnic group, please state:			
Cymysg/Mixed			
<input type="checkbox"/> Gwyn ac Asiaidd White and Asian	<input type="checkbox"/> Gwyn a Du Affricanaidd White and Black African	<input type="checkbox"/> Gwyn a Du Caribïaidd White and Black Caribbean	
<input type="checkbox"/> Unrhyw gefndir cymysg arall, nodwch/Any other mixed background, please state:			
Gwyn/White			
<input type="checkbox"/> Cymraeg/Welsh	<input type="checkbox"/> Saesneg/English	<input type="checkbox"/> Albanaidd/Scottish	<input type="checkbox"/> Gwyddelig o Ogledd Iwerddon/ Northern Irish
<input type="checkbox"/> Gwyddelig/Irish	<input type="checkbox"/> Prydeinig/British	<input type="checkbox"/> Deithiwr Gwyddelig/ Irish Traveller	<input type="checkbox"/> Sipsi Roma/sipsi Romany/Gypsy
<input type="checkbox"/> Unrhyw gefndir Gwyn arall, nodwch/Any other White background, please state:			
<input type="checkbox"/> Gwell gennyf beidio â dweud/Prefer not to say			

Crefydd neu gred/Religion or belief			
<input type="checkbox"/> Agnostig/Agnostic	<input type="checkbox"/> Anffyddiwr/Atheist	<input type="checkbox"/> Baha'i/Baha'i	<input type="checkbox"/> Bwdhaidd/Buddhist
<input type="checkbox"/> Cristion/Christian	<input type="checkbox"/> Hindŵ/Hindu	<input type="checkbox"/> Dyneiddiaeth/ Humanism	<input type="checkbox"/> Jainiaeth/Jainism
<input type="checkbox"/> Iddewig/Jewish	<input type="checkbox"/> Mwslimaidd/Muslim	<input type="checkbox"/> Paganiaeth/Paganism	<input type="checkbox"/> Rastaffariad/ Rastafarian
<input type="checkbox"/> Shinto/Shinto	<input type="checkbox"/> Sikh/Sikh	<input type="checkbox"/> Tao/Tao	<input type="checkbox"/> Zoroastriaidd/ Zoroastrian
<input type="checkbox"/> Arall/Other	<input type="checkbox"/> Dim crefydd/ No religion	<input type="checkbox"/> Gwell gennyf beidio â dweud/Prefer not to say	

Cyfeiriadedd rhywiol/Sexual orientation		
<input type="checkbox"/> Deurywiol/ Bisexual	<input type="checkbox"/> Hoyw/Lesbiad/ Gay/lesbian	<input type="checkbox"/> Heterorywiol/Syth Heterosexual/Straight
Os yw'n well gennyf ddefnyddio eich term eich hunan, nodwch ef yma/ If you prefer to use a different term, please provide this here		
<input type="checkbox"/> Gwell gennyf beidio â dweud/Prefer not to say		
Ydych chi'n arddel hunaniaeth traws?/Do you identify as transgender?		
<input type="checkbox"/> Ydw/Yes	<input type="checkbox"/> Nac Ydw/No	<input type="checkbox"/> Gwell gennyf beidio â dweud/Prefer not to say

Anabledd/Disability	
Mae Deddf Cydraddoldeb 2010 yn diffinio anabledd fel: "Amhariad corfforol neu feddyliol sydd yn cael effaith sylweddol a hir dymor ar allu person i berfformio gweithgareddau beunyddiol normal".	
The Equality Act 2010 defines disability as: "A physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day-to-day activities".	
A ydych yn ystyried eich hun yn anabl fel y diffinnir yn Neddf Cydraddoldeb 2010 uchod? Do you consider yourself to be disabled as defined by the above Equality Act 2010?	
<input type="checkbox"/> Ydw/Yes	<input type="checkbox"/> Nac Ydw/No

