### **Policy Equality Statement**

**Policy Title**: Policy Equality Statement  
**Effective Date**: [Insert Date]  
**Approved By**: [Insert Approver's Name/Role]

**Purpose**:  
To affirm [Organization Name]’s commitment to promoting equality, diversity, and inclusion in all areas of operation.

**Policy Statement**:

* [Organization Name] is committed to ensuring equality of opportunity for all individuals, regardless of age, gender, race, ethnicity, disability, sexual orientation, religion, or socioeconomic background.
* Discrimination, harassment, or victimization will not be tolerated.
* Equal access to opportunities, services, and resources will be provided to all employees and stakeholders.
* Regular training and awareness programs will be conducted to foster an inclusive culture.

**Review Schedule**:  
This policy will be reviewed annually to align with legal and best practice updates.

**Contact**:  
For concerns or questions regarding equality, contact [Department/Individual Name].