

Application Form

**Challenge
for Change**

*Making your
housing service
better*

Surname / Family Name

Address

First Name

Title

Daytime Telephone

Home Telephone

Email Address

Post Code

Q1 Please tell us why you want to become a part of Sheffield City Council Housing's Tenants Scrutiny group?

Q2 Please tell us what skills you can bring to the group and any relevant experience?



We want to make sure that our services are provided fairly to those who need them. The information collected helps us to improve services, and reduce potential barriers to access.

Please answer the questions below by ticking the boxes that you feel most describes you. Some questions may feel personal, but the information we collect will be kept confidential and secure.

If you do not want to answer any specific question then please leave it blank.

Gender

Male

Female

Do you consider yourself to be: (please tick one)

Bi-Sexual	Gay	Hetrosexual	Lesbian	Prefer not to say
-----------	-----	-------------	---------	-------------------

Do you have a disability?: (please tick one)

Yes	No	Prefer not to say	If Yes, please state:
-----	----	-------------------	-----------------------

Which best describes your racial or cultural origins? (please tick one)

White:	British	<input type="checkbox"/>	Irish	<input type="checkbox"/>
	Gypsy/Traveller	<input type="checkbox"/>		
	Any other white background	<input type="checkbox"/>		
Mixed/Dual Heritage:	White and Black Caribbean	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>
	White and Black African	<input type="checkbox"/>		
	Any other mixed background	<input type="checkbox"/>		
Asian or Asian British:	Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
	Bangladeshi	<input type="checkbox"/>		
	Any other Asian background	<input type="checkbox"/>		
Black or Black British:	Caribbean	<input type="checkbox"/>	Somali	<input type="checkbox"/>
	Other African	<input type="checkbox"/>		
	Any other black background	<input type="checkbox"/>		
Chinese or Other Ethnic Group:	Chinese	<input type="checkbox"/>	Yemeni	<input type="checkbox"/>
	Other	<input type="checkbox"/>		

Signed

Date

NEED TO KNOW MORE?

Contact the Community Engagement Team on: **0114 273 5566**
or email us at: getinvolved@sheffield.gov.uk