

EQUALITIES MONITORING FORM HOUSING APPLICANTS

write something in please print in block capitals.

fice Use Only oplicant
] 1
7 2

WHY COMPLETE THIS FORM?

Please help us improve our services by completing this equalities monitoring form. All the information that you provide will be treated as confidential. We do not want to intrude into your private life and you do not have to answer the questions if you prefer not to but this information can help us establish if we are treating all applicants equally.

The questions we ask are based on 6 key areas of equality

AGE
DISABILITY
ETHNICITY
GENDER
SEXUAL ORIENTATION
BELIEF

We also collect information on economic status of applicants to help us plan our services.

None of this information will be used in connection with your housing application

Please compete 1 form for each person making the application.

Please put a cross in the boxes as appropriate. Where you need to

3. Do you have a disability?

By this we mean a condition which has a long term or substantial effect on your ability to carry out normal day to day activities.

	Yes

	No
8	INO

4. If you answered YES - how would you best describe your disability? Put a cross at all that apply.

Dh	اممامر	ä f
IPM	/sical	ã.

	Leaning
Ш	Disability

Hearing Impairment

Mental III Health

☐ Visual Impairment

Other

1

5. ETHNICITY WHITE **BLACK, BLACK SCOTTISH, BLACK BRITISH** Scottish African African Scottish or African British English Caribbean, Caribbean Scottish or Caribbean British Welsh Northern Irish Black, Black Scottish or Black British Irish Other British Gypsy/Traveller Polish Other OTHER ETHNIC BACKGROUND Arab, Arab Scottish, Other Arab British Other ASIAN, ASIAN SCOTTISH, ASIAN BRITISH Indian,Indian Scottish or Indian British Pakistani, Pakistani Scottish or MIXED Pakistani British Bangladeshi, Bangladeshi Scottish or Bangladeshi British Chinese, Chinese Scottish or Chinese ☐ Mixed or Multiple Ethnic Background

2

version June 2011

British

Other

Scottish Charity No SC 036262

6. GENDER For the purposes of this question "trandefined as an individual who lives, or witime in the gender opposite to that the birth. Male Female Transgender	7. SEXUAL ORIENTATION Heterosexual/Straight Gay man Gay woman/lesbian Bisexual Prefer not to say	
☐ Prefer Not To Say	RCANFORDADINGEN ANTENDES DA PARTICIPA DE LA PROPERTICIO DEL PROPERTICIO	Other
Please tell us what religion,religious	denomination or bod	
a. Local Authority Area/s where you are seeking housing- tick all that apply	☐ Falkirk ☐ Clack	kmannanshire Stirling
b. Economic Status - put a cross at a	ll that apply	
Full Time Employment (16 hours or more a week)	☐ Training	Unemployed
Part Time Employment (less than 16 hours per week)	Student	☐ At Home
☐ Self Employed	Retired	☐ Disabled/ Long Term Sick
☐ Other		

ECONOMIC STATUS continued

c. How is your household income made up Put a cross at all that apply. If you are making joint applications, you need to fill this part in on one form.	household income from all sources eg wages,	
☐ Earnings/Wages	Under £50	
Other income from employment/training	Between £51 & £100	
☐ Jobseekers allowance	☐ Between £151 and £200	
☐ Working Tax Credit	☐ Between £201 & £250	
Child Benefit	☐ Between £251 & £300	
State Retirement Pension	☐ Between £301 & £350	
☐ Works/Private Pension	☐ Between £351 & £400	
Pension Tax Credit	☐ Between £401 & £450	
Self Employed	☐ Between £451 & £500	
Other	☐ £501 or over	
	☐ Do not wish to provide	
Office Use Month	Thank you you much for taking the time to complete	
April Cotober	Thank you very much for taking the time to complete the form. We appreciate your help. Please return the form to Paragon Housing Association Limited Invergange House	
May November		
June December		
July January	Station Rd	
August February	Grangemouth FK3 8DG	
Sept March		