

Patient Participation Group Application Form

Coming together to make a difference

Please email completed forms to Main.Office@gp-L81070.nhs.uk or hand in at Reception. Please note the group is not for medical enquiries or complaints. Please complete all information as this will help ensure our patient group is as representative as possible. PLEASE RETURN BY 13TH JANUARY 2012.

Forename:.....	Surname:.....	Ethnicity:
Email:	Telephone number:.....	White British: <input type="checkbox"/>
Gender: Male <input type="checkbox"/>	Marital status:.....	White Irish: <input type="checkbox"/>
Female <input type="checkbox"/>	Work status:	Other white background: <input type="checkbox"/>
	Employed full time <input type="checkbox"/>	Mixed white & Asian: <input type="checkbox"/>
	Employed part time <input type="checkbox"/>	Indian: <input type="checkbox"/>
Age: 0-16 <input type="checkbox"/>	Self employed <input type="checkbox"/>	Pakistani: <input type="checkbox"/>
17-24 <input type="checkbox"/>	Unemployed <input type="checkbox"/>	Bangladeshi: <input type="checkbox"/>
25-34 <input type="checkbox"/>	Student <input type="checkbox"/>	Other Asian background: <input type="checkbox"/>
35-44 <input type="checkbox"/>	Retired <input type="checkbox"/>	Chinese: <input type="checkbox"/>
45-54 <input type="checkbox"/>	Homemaker <input type="checkbox"/>	African: <input type="checkbox"/>
55-64 <input type="checkbox"/>	Do you care or look after anyone including family:	Mixed white & black African: <input type="checkbox"/>
65-74 <input type="checkbox"/>	Yes <input type="checkbox"/>	Caribbean: <input type="checkbox"/>
75-84 <input type="checkbox"/>	No <input type="checkbox"/>	Mixed white & black Caribbean: <input type="checkbox"/>
85-90 <input type="checkbox"/>	Do you live with a long term condition/disability:	Other black background: <input type="checkbox"/>
90+ <input type="checkbox"/>	Yes <input type="checkbox"/>	Other mixed background: <input type="checkbox"/>
Do you have children?	No <input type="checkbox"/>	Any other: <input type="checkbox"/>
Yes <input type="checkbox"/>		
No <input type="checkbox"/>		

The information you supply us will be used lawfully, in accordance with the Data Protection Act 1998. The Data Protection Act gives you the right to know what information is held about you and sets out rules to make sure that this information is handled properly.