

How would you like to get involved?

Get involved... have your say

Please tell us what area you would like to get involved in:

- | | |
|--|--|
| <input type="checkbox"/> Residents Forum | <input type="checkbox"/> Customer Service |
| <input type="checkbox"/> Maintenance and Repairs | <input type="checkbox"/> Anti-social Behaviour |
| <input type="checkbox"/> Resident Inspectors | <input type="checkbox"/> Rents |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Retirement Housing |
| <input type="checkbox"/> Learning Disability | <input type="checkbox"/> Youth issues |
| <input type="checkbox"/> Design of new homes | <input type="checkbox"/> Policy |
| <input type="checkbox"/> Becoming a Board member | <input type="checkbox"/> Residents Association |

If other please state

.....

How would you like to be involved (Please tick as many as apply to you):

- | | Day | Evening |
|----------------------------|--------------------------|--------------------------|
| • Via Telephone | <input type="checkbox"/> | <input type="checkbox"/> |
| • Via Email | <input type="checkbox"/> | <input type="checkbox"/> |
| • Via Post | <input type="checkbox"/> | <input type="checkbox"/> |
| • Completing Questionnaire | <input type="checkbox"/> | <input type="checkbox"/> |
| • Attending Meetings | <input type="checkbox"/> | <input type="checkbox"/> |

If other please specify

.....

Signed

.....

Date

.....



 **origin** HOUSING

great homes
positive people
strong communities

Resident Involvement Co-ordinator

Origin Housing, St Richards House, 110 Eversholt St, London NW1 1BS.
020 7209 9341 - gulshan.sangha@originhousing.org.uk

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Your personal details

Full Name

Full Address

Postcode

Telephone

Email

Borough

- Tenure:
- General Rented
 - Leasehold
 - Temporary Accommodation
 - Shared Ownership

- You are:
- Employed full time
 - Employed part time
 - Unemployed
 - Parent/Carer
 - Studying
 - Retired

My first spoken language is

My second spoken language is

Date of Birth

I am: Male Female

Do you consider yourself to be disabled or have a disability?

- Yes No

If 'Yes' please indicate so that we can respond to any needs you may have:

- Mobility
- Wheelchair user
- Visually impaired
- Hearing impaired
- Learning disability
- Other (please specify)

Your Neighbourhood Officer or Scheme Manager

What best describes your ethnic group? Please indicate:

White

- British
- Irish
- Other*

Asian

- Asian British
- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other*

Black

- Black British
- Carribean
- African
- Other*

Mixed

- White/Black Carribean
- White/Black African
- White/Asian

*If 'Other' please specify

Question refused

If you would like assistance completing this form please contact your neighbourhood officer or scheme manager.