

Rugby Borough Council Application for Housing Waiting List

1. Your details

	You (the applicant)	Joint applicant
Title (Mr/ Mrs/ Miss/ Ms/other)		
Surname (family name)		
First names		
Are you known or have you been known or used any other name? Please give details.		
Nationality		
Date of birth (dd/mm/yyyy)	/ /	/ /
National Insurance Number		
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Not known/other <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Not known/other <input type="checkbox"/>
Current address		
Postcode		
What date did you move to this address?		
Please tell us where we can get in touch with you by post if you are homeless or have no fixed address?		
Landline phone number		
Mobile phone number		
Email address		

Do you need someone to act on your behalf regarding your application? This could be a friend or relative who is helping you.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you want all correspondence sent to this person?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you give permission for the Council to discuss all aspects of your application with this person?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give the full name, address including postcode and phone number of the person who will be helping you.	Name Address Postcode Phone No.	Name Address Postcode Phone No.

2. Household

Please give details of who will live with you.

	Surname	First names	Date of birth	Sex Male or female	Relationship to you	Tick if this person lives elsewhere
Person 1			/ /			
Person 2			/ /			
Person 3			/ /			
Person 4			/ /			
Person 5			/ /			

Is anyone who will live with you pregnant? Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'Yes', please give their name and the date the baby is due. Name: Date: Sex (if known):	
Are you receiving Child Benefit/ Child Tax Credit or an extra amount of Universal Credit for a child or young person who lives or will live with you?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

<p>Are you an approved foster carer or prospective adopter?</p> <p>If so, please tell us how many children you have been approved to care for and if possible, give the age/s and sex.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Are you or any member of your family employed by Rugby Borough Council?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>If so, please give the name and relationship to the person.</p>	
<p>Are you or any member of your family an elected member of the Council or a board member of a partner housing association?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>If so, please give the name and the relationship to the person.</p>	

Relationships to be declared are Spouse or Partner, Father, Mother, Grandparent, Sister, Brother, Adult Child and any step-relations, Uncle, Aunt, Nephew and Niece.

3. Local connection

To join the waiting list, you need to have a local connection to Rugby Borough, or you need to meet the criteria that means you do not need one.

Please fill in the questions below to help us to decide if you can join the waiting list.

	You (the applicant)	Joint applicant
<p>Have you lived in the Borough for at least six months out of the last 12 months or at least three years out of the last five years?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Are you in employment or have you received an evidenced offer of employment within the Borough?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'Yes', please give the name and address of your employer and the date you started.</p> <p>Name:</p> <p>Address:</p> <p>Date:</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'Yes', please give the name and address of your employer and the date you started.</p> <p>Name:</p> <p>Address:</p> <p>Date:</p>

	You (the applicant)	Joint applicant
Do you have a close family association in the Borough? (Mother, father, son, daughter, sister, brother, grandparent, step-relative, adoptive parents)	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please give the name of the family member, their date of birth, address, phone number, how long they have lived there and their relationship to you. Name: Date of birth: Address: Phone: Time at address: Relationship to you:	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please give the name of the family member, their date of birth, address, phone number, how long they have lived there and their relationship to you. Name: Date of birth: Address: Phone: Time at address: Relationship to you:

Are you a registered carer for someone resident within the Borough? Please tell us the name and address of the person you care for at part 13.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a carer? Please tell us the name and address of the person who cares for you at part 13.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Armed Forces. Please tick if any of these apply to you.

	You (the applicant)	Joint applicant
Are you currently serving, or have you ever served, in the regular forces?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you the spouse or civil partner of armed forces personnel, leaving service accommodation after the death of your partner in active service?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you the ex-husband, wife or civil partner of armed forces personnel who is required to leave service accommodation?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you currently serving or have served in the regular forces and suffering from a serious injury, illness or disability which is attributable (wholly or partly) to that service?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If you answered “No” to every question on the previous page, please tick if any of these apply to you.

	You (the applicant)	Joint applicant
Are you a council or housing-association tenant who needs to move to the Borough to avoid hardship?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you a council or housing-association tenant who needs to move to the district because of work or an offer of work?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you need to move because you are a victim of domestic abuse, violence or harassment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you need to move on medical or welfare grounds?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has any Local Authority accepted a duty to house you? Please enclose your decision letter.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

4. Immigration status

Some classes of people living in the United Kingdom are not entitled to social housing based on their immigration status. We will carry out checks to confirm your eligibility.

	You (the applicant)	Joint applicant
Are you a UK citizen?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you lived or worked abroad? What date did you last enter the UK if you have ever lived or worked abroad?	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please give dates and details.	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please give dates and details.
Are you subject to immigration control under the Asylum & Immigration Act 1996? Please tell us your immigration status and the date you arrived in the UK? Please let us see your biometric residence card.	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please give details.	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please give details.

	You (the applicant)	Joint applicant
<p>Have you been granted pre-settled status or settled status by the EU settlement scheme? Please give details.</p> <p>Please let us see your passport if it contains a vignette or your biometric residence permit.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>If you have been told you can view your immigration status on-line, please tell us your 'share code' so we can check your right to rent and claim welfare benefits.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

5. Convictions

Have you (or any member of your household) been convicted of any 'offences against the person', this means you have committed a crime causing direct physical harm or force being applied to another person, this includes but is not limited to fatal and sexual offences, assault and injury, or 'crimes against property' which includes arson, theft, burglary, robbery, and fraud. Please tell us if any of these convictions are 'spent' under the Rehabilitations of Offenders Act 1974.

Yes No

If 'Yes' give the name of the household member, date of conviction and reason for conviction. Please tell us if any of these convictions are 'spent' under the Rehabilitation of Offenders Act 1974.

6. Where have you lived before?

Please give details of all the addresses where you and your joint applicant have lived during the past five years starting with your current address.

You (the applicant)					
Full address	Date from	Date to	Reason for leaving	Name and address of Landlord	Tenure (private, owner etc.)
	/ /	present			
	/ /	/ /			
	/ /	/ /			

Joint applicant			
Full address	Date from	Date to	Reason for leaving
	/ /	present	
	/ /	/ /	
	/ /	/ /	

7. Tenure

Please tick the type of accommodation you live in.

Rugby Borough Council tenant	<input type="checkbox"/>	Looked after by social services	<input type="checkbox"/>
Council tenant outside the area	<input type="checkbox"/>	Shared accommodation	<input type="checkbox"/>
Housing-association tenant in the area	<input type="checkbox"/>	Other (please give details)	<input type="checkbox"/>
Housing-association tenant outside the area	<input type="checkbox"/>		
Private tenant in the area	<input type="checkbox"/>	Supported accommodation	<input type="checkbox"/>
Private tenant outside the area	<input type="checkbox"/>	No tenure – sofa-surfing	<input type="checkbox"/>
Owner	<input type="checkbox"/>	No tenure – rough sleeping	<input type="checkbox"/>
Shared owner	<input type="checkbox"/>		
Hotel or guest house	<input type="checkbox"/>		
Living with family	<input type="checkbox"/>		
Living with friends	<input type="checkbox"/>		
Armed-forces accommodation	<input type="checkbox"/>		
Hostel	<input type="checkbox"/>		
Lodger	<input type="checkbox"/>		

8. Current home

What type of accommodation do you live in?

House	<input type="checkbox"/>	<input type="checkbox"/> Other (please give details):
Flat	<input type="checkbox"/>	
Maisonette	<input type="checkbox"/>	
Bedsit	<input type="checkbox"/>	
Bungalow	<input type="checkbox"/>	How many bedrooms does your current home have?
Caravan or mobile home	<input type="checkbox"/>	
Room in a shared house	<input type="checkbox"/>	
Supported accommodation	<input type="checkbox"/>	
Armed-forces accommodation	<input type="checkbox"/>	If you live in a block of flats or a maisonette, which floor are you on (ground floor, first floor and so on)?

For each bedroom in the property where you live now, please say who has use of the room.

	Names of occupiers
Bedroom 1	
Bedroom 2	
Bedroom 3	
Bedroom 4	
Bedroom 5	

<p>Facilities in your home.</p> <p>Is the bathroom, toilet or kitchen shared with anyone other than your household?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'Yes', please tell us what facilities you share, and details of the other household involved.</p>
<p>Are you living in insanitary or unsatisfactory housing conditions?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Does your home lack any facilities such as a bathroom, inside toilet hot or cold- water supply, adequate heating or a kitchen?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>If so, please tell us who has this been reported?</p>	<p>Landlord <input type="checkbox"/> Council <input type="checkbox"/> Environmental Health <input type="checkbox"/> Private Housing Standards Team <input type="checkbox"/></p>
<p>Please tell us how long your landlord thinks it will take to put right these issues?</p>	

9. Health

Are you (or a member of your household) unable to manage in your current home because of ill health or disability, and do you have a special housing need because of this?

	You (the applicant)	Joint applicant	Other household member
If 'Yes', you will need to provide evidence from your GP or other medical health professional	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Do you (or a member of your household) have any involvement with any of the following?

	You	J/A	Other		You	J/A	Other
Health Worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Probation Officer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Occupational Therapist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community mental-health worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Leaving Care Personal Advisor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	You (the applicant)			Joint applicant			Other
If you have ticked one or more of these boxes, please give details. We need the name, address, phone number and email address for each person.							

10. Economic status and household income

Does your household have assets, including savings or investments or equity in a property, of more than £16,000?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your household's gross income more than £45,000 per year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your household's gross income more than £25,000 per year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please tell us how much your net (after tax, national insurance and pension contribution) monthly income is?	
How much do you pay in rent and council tax each month?	
How much are your monthly outgoings?	
Does this include money to repay any debts? If so, please tell us how much this amounts to each month?	
Do you or any other member of your household own any property or land? Please tell us the address	Yes <input type="checkbox"/> No <input type="checkbox"/>
What is the current value of the property or land?	£
If there is a mortgage on the property, if so, please tell us how much is left to pay?	£
Is the property up for sale? Please tell us the name of the Agent handling the sale. What date did the property go on the market?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Why are you selling this property?	

Homeowners will usually be excluded from joining the waiting list unless there are exceptional circumstances. If you are allowed to register on the waiting list and were to be offered social housing, some landlords may decline to allocate you a tenancy.

11. Why are you applying for housing?

Please tick one or more boxes.

Moving on from supported housing accommodation in the Borough <input type="checkbox"/>	Under occupation of current accommodation <input type="checkbox"/>
Homeless <input type="checkbox"/>	Problems with overcrowding <input type="checkbox"/>
If you pick this option, please tick if you have done the following.	To be near work <input type="checkbox"/>
Approached the local authority where you live for help. <input type="checkbox"/>	To set up home independently <input type="checkbox"/>
Attached copies of the local authority's decision letter. <input type="checkbox"/>	Domestic Abuse, violence or harassment <input type="checkbox"/>
To give or receive care and support. <input type="checkbox"/>	Need to move on medical or welfare grounds including those relating to disability. <input type="checkbox"/>
Other: <input type="checkbox"/> (Please give details)	Need to move to the district to avoid hardship to you or to other members of your household <input type="checkbox"/>
	Shared Ownership <input type="checkbox"/>

12. Housing-related debts

Do you have any housing-related debts?

You (the applicant)		Joint applicant	
Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If 'Yes', please give the amounts below.		If 'Yes', please give the amounts below.	
Amount		Amount	
Rent arrears	£	Rent arrears	£
Former tenant arrears	£	Former tenant arrears	£
Housing Benefit overpayment	£	Housing Benefit overpayment	£
Council tax	£	Council tax	£
Court costs	£	Court costs	£
Repair charges	£	Repair charges	£
Any housing-related supporting people charge debt	£	Any housing-related supporting people charge debt	£
Other housing debt for example to a mortgage lender	£	Other housing debt for example to a mortgage lender	£

If you have said that you have housing-related debts, what arrangements have you made to clear the debt?

You (the applicant)	Joint applicant

13. Other information

Please tell us why you are applying for housing.

Tell us about any pets that you want to be housed with. If you have an assistance dog, please provide a letter of verification from your GP or other medical health professional.

Tell us about any areas within the Borough where you believe you cannot live due to a risk of violence, harassment or domestic abuse. Please provide evidence of this risk

Please tell us the name and address of the person you care for or receive care from

If you have told us you want to live in a village location, please tell us what connection you have to that area.

We will require you to provide the following documents with your application. If the documents are not provided, we will not be able to consider your application

- Photo identification for you and the joint applicant (e.g., passport, driving licence)
- Last 3 months or 5 weeks, pay slips for you and the joint applicant
- Last 3 months bank statements for all accounts held by you and the joint applicant
- Birth Certificates for each child

What areas are you interested in moving to?

Rugby Borough Council has very limited numbers of properties across all our housing stock, the more areas you select the more properties you can be matched for based on your Housing Needs.

All areas General Needs

**General Needs
Accommodation**

A	Urban North (this includes Brownsover Estate, Boughton Road area, Coton Park, Eden Park, Newbold Parkfield, Newbold Glebe)	B	Urban Central (this includes Town Centre, New Bilton/Croop Hill)
C	Urban East (this includes Eastlands/Winfield, Hillmorton, Houlton)	D	Urban South (this includes Rokeby, Bilton/Admirals Estate, Overslade)
F	Urban Fringe Villages (this includes Long Lawford, Dunchurch, Churchover, Clifton-on-Dunsmore, Newton, Cawston)		
H North Villages 1		K South Villages	
HA	Brinklow	KA	Flecknoe
HB	Brandon and Bretford	KB	Willoughby
HC	Binley Woods	KC	Grandborough
HD	Harborough Magna	KD	Birdingbury
HE	Stretton under Fosse	KE	Boughton and Frankton
HF	Monks Kirby	KF	Marton
HG	Pailton		
		J	West Villages
G	North Villages 2	JA	Wolston
GA	Shilton	JB	Church Lawford
GB	Ansty	JC	Stretton-on-Dunsmore
GC	Burton Hastings	JD	Ryton-on-Dunsmore
GD	Wolvey	JE	Princethorpe
GE	Withybrook		
GF	Wibtoft		
GG	Willey		

Colour Key Code for Sheltered Properties	
	No Pets Allowed and has a Community Room within scheme
	Community Room within scheme

All areas Sheltered Accommodation

Sheltered Accommodation		S	Bilton
		SA	Assheton Close
L	Central	SB	Stacey Court
LA	Albert Square	SC	Harold Cox Place
LB	Edward Court	SD	Haig Court
LC	James Court	SE	St Mark's Court
LE	Lesley Souter House	SF	Egerton Leigh Court
LD	Murrayian Close/Arnold Street		
		T	Hillmorton
M	Central West	TA	Lever Road / Coton Road
MA	Lawford Road / Victoria St	TB	Duffy Place / High Street
MB	Eliot Court / Dryden Walk / Dryden Place	TC	Forresters / Astley Place
MD	John Thwaites Close	TD	Mercer Court
MG	Frederick Press Way	TE	Robbins Court
MH	Union Street	TF	Pettiver Crescent /Bromwich Rd
MJ	Pennington St / Round St	TG	Fox Close
MK	Avon Court	TH	The Kent
ML	Alfred Green Close	TJ	Jackson / Jenkins Road, Featherbed Lane
MM	Dickinson Close		
		U	Urban Fringes
N	Central East	UA	Judge Close, Long Lawford
NA	Clifton Rd / Sun St/ Windsor St	UB	Hirst / Greenwood Close, E'Burgh Way, Holbrook Road, Long Lawford
		UC	Edmonson Close, Dunchurch
P	Brownover/Newbold	UE	Ferriers Close, Dunchurch
PA	Patterdale	UD	Tanser Court, Dunchurch
PB	Stretton Court	UF	The Beeches, Clifton
PD	Fosterd Road		
PE	Norman Rd / Quarry Close		
PF	Robotham Close / Allesley Rd / Cotterell Rd	V	West Villages
		VA	Sodens Avenue, Ryton
		VB	Hill Crescent, Stretton
R	Overslade	VC	Bennett Court, Wolston
RA	Deepmore Road	VD	Sir Winston Churchill Place / Birchwood Rd, Binley Woods
RB	Lytham Rd / St Anne's Rd		
RC	Buchanan Road		
RD	Mellish Court		
RE	Hudson Road	W	North Villages
RF	Marlborough Road	WA	Primrose Ct, Harborough Magna
RG	Garyth Williams Close	WB	Brookside Avenue, Pailton
RH	Wentworth Road	WC	Potters Close, Brinklow
		WD	Great Balance, Brinklow
		WE	Hall Grove, Brinklow
		WF	Hallway Drive, Shilton
		WG	Pipers End, Wolvey

Declaration and Consent

By returning this Waiting List Application form by email to Rugby Borough Council I am agreeing to the following Declaration and Consent (delete as appropriate)

By signing and returning this Waiting List Application form by post to Rugby Borough Council I am agreeing to the following Declaration and Consent (delete as appropriate)

I/We confirm that the details in the attached Waiting List Application form are true. I/We will tell you about any changes in my/our circumstances. I/We understand that any false or misleading statement or withholding any relevant information, now or in the future, may result in my application being cancelled or any tenancy granted to me ending, or may lead to a prosecution for criminal offences. I/We understand that it is an offence under Section 171 of Part 6 of The Housing Act 1996 to give false statements, withhold information or fail to disclose a change of circumstances in relation to any application processed by Rugby Borough Council. A person guilty of an offence under this section is liable on conviction to a fine of up to £5,000.

Why do we collect this information?

We need the personal information you supply so that we can check if you are eligible to be housed. Rugby Borough Council and Registered Providers (Housing Associations), work together for the purpose of prioritising the allocation of social housing. The legal basis for processing your information is under the Councils public duties as set out in part 6 and part 7 of the Housing Act 1996, as amended.

What information is collected?

- Name
- Address
- Household details
- Financial circumstances
- Employment details
- Housing circumstances
- Health details

Who has access to the information?

The information you provide will be accessible by Local Authority staff working in the Customer Advice and Support Team. It is shared with other social housing landlords so they can allocate their properties appropriately. The information may also be shared with other organisations for example, other Local Authority departments, medical practitioners and advisers, Government Departments and Agencies.

How long is the information kept?

The information will be kept electronically for six years after the date of our last contact with you. Further details on your statutory rights, and other privacy information can be found on our website at: -

https://www.rugby.gov.uk/privacy_and_cookies

I authorise Rugby Borough Council Customer Advice and Support Team to make enquiries regarding my housing issues in order to process my application. I give consent for Rugby Borough Council to share any information or data relating to this Waiting List Application to the third parties mentioned above and authorise those third parties to provide information (including sensitive information) to Rugby Borough Council. I understand that authorisation (consent) is being given by myself on behalf of all relevant members of my household.

Your signature.

Date.

Emergency contact/Next of kin

Relationship to you

If this form has been filled in by someone other than the person applying for housing, please tell us why you are filling in this form for the person claiming.

I declare that, as far as possible, I have confirmed with the person applying that the answers I have written on this form are correct.

Name of the person who filled in the form

Relationship to the person applying.

Equal opportunities

We serve a wide-ranging community and are committed to meeting the needs of everyone in providing housing. We want to make sure that everyone has a fair chance of housing, no matter what their ethnic origin, sex, age or disability. To make sure that no person receives less favourable treatment, and for no other reason, please fill in the following information. This information will be strictly confidential.

Disability

	You (the applicant)	Joint applicant
Do you consider yourself to have a disability?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you have ticked 'Yes' to the above question, please give more details.		

What would you consider your ethnic group to be?

You (the applicant)

Joint Applicant

White

- A** British
 Irish
 Gypsy or Traveller
 Any other white background, please write in

White

- A** British
 Irish
 Gypsy or Traveller
 Any other white background, please write in

Mixed

- B** White and black Caribbean
 White and black African
 White and Asian
 Any other mixed background, please write in

Mixed

- B** White and black Caribbean
 White and black African
 White and Asian
 Any other mixed background, please write in

Asian or Asian British

- C** Indian
 Pakistani
 Bangladeshi
 Any other Asian background, please write in

Asian or Asian British

- C** Indian
 Pakistani
 Bangladeshi
 Any other Asian background, please write in

Black or Black British

- D** Caribbean
 African
 Any other black background, please write in

Black or Black British

- D** Caribbean
 African
 Any other black background, please write in

E Chinese or other ethnic background

- Chinese
 Any other ethnic background, please write in

E Chinese or other ethnic background

- Chinese
 Any other ethnic background, please write in