

Tenant Involvement in Hull

This is your chance to have your say and influence your housing services.

Who can register?

- Any current Hull Council tenant or leaseholder (including family members living in the property and registered)
- Any home owner, housing association tenant, or private tenant (including family members living in the household and registered) living on Hull City Council housing estates

Why should I get involved?

- We want to provide the kind of service that customers really need, but we can only achieve this with your help
- We believe that everyone should have a say
- We need to work together to improve standards and make things happen
- We know that working together will make the service better, more effective and more efficient
- Through this involvement we want to see stronger, supportive, more connected communities

What will I be expected to do?

There are all sorts of ways of getting your views heard. All you have to do is:

1. Choose the subjects or services that interest you
2. Choose one or more methods of getting involved that suit you. (Maybe you are willing to fill in a survey, take part in a discussion group or reply to an email)

How much time will I be asked to give?

It's up to you. You will be invited to take part in any activity that you have shown an interest in, but you are not obliged to take part.

What help will I get for being involved?

Help with travel and childcare costs will be available where appropriate.

Help and support is provided by the dedicated Tenant Participation Team who are on hand to answer your questions.

So how do I join?

Just complete and return this form using the freepost address.

What happens next?

Once registered you will receive more details and you may be invited to information or training sessions to help you in your role.

For further information now, or an additional form contact the Tenant Participation Team on 300 300 or email: tenant.resident@hullcc.gov.uk

The information in this document can be made available in other formats (large print, audio cassette BSL Braille as appropriate) and different community languages.

Please telephone (01482) 300 300.

Minicom users please telephone 300 349.



Housing Opinion Panel Registration Form

Title:
Name:
Address:
.....
Postcode: Email:
Daytime number: Mobile number:

Ethnic Origin

Which of the following best describes your ethnic origin? (Please tick one box only)

White		Asian/Asian British (please circle)	
White British	<input type="checkbox"/>	Indian	<input type="checkbox"/>
White Irish	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Any other White background	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
<hr/>		Chinese	<input type="checkbox"/>
Mixed/Multiple Ethnic Groups		Any other Asian background	<input type="checkbox"/>
White and Black Caribbean	<input type="checkbox"/>	<hr/>	
White and Black African	<input type="checkbox"/>	Any other Ethnic Group	
White and Asian	<input type="checkbox"/>	Gypsy/Romany/Irish Traveller	<input type="checkbox"/>
Any other Mixed background	<input type="checkbox"/>	Arab	<input type="checkbox"/>
<hr/>		Any other please specify	<input type="checkbox"/>
Black/ Black British (please circle)		
Black - Caribbean	<input type="checkbox"/>	<div style="border: 1px solid black; padding: 5px;">What is your main language?</div>	
Black - African	<input type="checkbox"/>		
Any other Black background	<input type="checkbox"/>		

What is your nationality?

.....

Are your day to day activities limited because of a health problem that has or is expected to last at least 12 months?

Yes limited a lot Yes limited a little No

What is your date of birth?

/ /

Do you have any child/children under the age of 18 living at home?

Yes No

How would you describe yourself?

- | | |
|--|--|
| <input type="checkbox"/> Council Tenant | <input type="checkbox"/> Housing Association Tenant |
| <input type="checkbox"/> Private Tenant | <input type="checkbox"/> Home Owner |
| <input type="checkbox"/> Council Leaseholder | <input type="checkbox"/> Relative or lodger of any of the above |
| | <input type="checkbox"/> Licensee (Tenancy for under 18 year olds) |

I have an interest in (tick all that apply)*

- | | | |
|--|--|--|
| <input type="checkbox"/> Repairs and improvement works* | <input type="checkbox"/> Anti-social behaviour (noise/harassment vandalism) | <input type="checkbox"/> Leaseholder services |
| <input type="checkbox"/> Environmental improvements | <input type="checkbox"/> Production of tenants news pages and other housing publicity* | <input type="checkbox"/> Services for young people |
| <input type="checkbox"/> Customer services* | <input type="checkbox"/> Tenant involvement* | <input type="checkbox"/> Empty homes* |
| <input type="checkbox"/> Homeless issues | <input type="checkbox"/> Equalities policies (ensuring services are accessible to all) | <input type="checkbox"/> Budget, finance and rent setting* |
| <input type="checkbox"/> Neighbourhood services (caretaking/cleaning /grass cutting) | | <input type="checkbox"/> Housing and disability issues |
| | | <input type="checkbox"/> Lettings* |

*These activities are only available to council tenants

I would like to be involved in the following ways (tick all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Joining the Tenants' Forum | <input type="checkbox"/> Attending meetings checking service performance |
| <input type="checkbox"/> Completing a telephone/postal/face to face survey (please circle) | <input type="checkbox"/> Attending local exhibitions or roadshows |
| <input type="checkbox"/> Receiving and commenting on proposals via email | <input type="checkbox"/> Joining my local tenant and residents group |
| <input type="checkbox"/> Attending focus groups | <input type="checkbox"/> Checking services (mystery shopper) |
| <input type="checkbox"/> Patch walks (estate inspections) | <input type="checkbox"/> Joining the Independent Tenant Review Panel |
| <input type="checkbox"/> Receiving newsletters | <input type="checkbox"/> Attending training events |

I am available (tick all that apply)

- Mornings
 Afternoons
 Evenings
 Weekends

We try to make our involvement activities as accessible as possible. Is there anything that we can do to help you take part? (For instance, documents in a format you can read or transport.)

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.....

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Please sign and date

Signature

Date

Parent/guardian permission for under 16 years olds

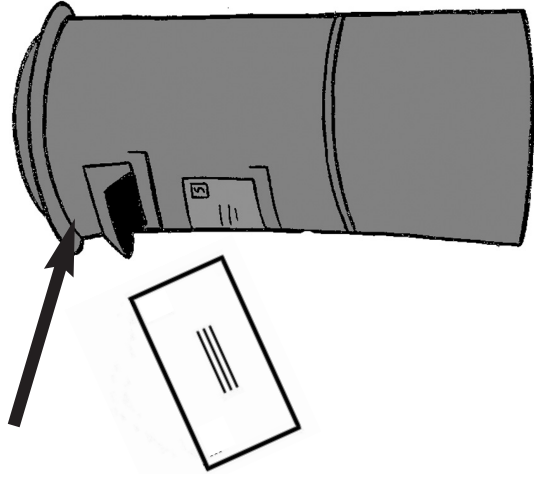
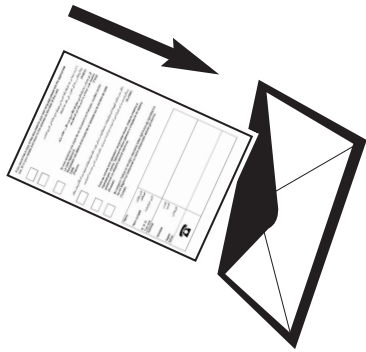
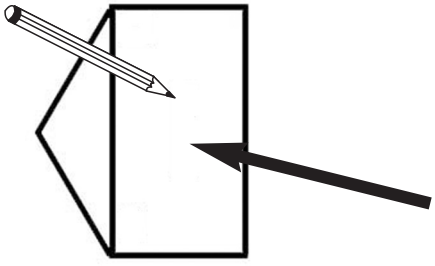
I give permission for my son/daughter to register for Tenant Involvement in Hull.

Signature

Date

Data Protection


In signing this form you are consenting to the Housing Service keeping your details. Everything you tell us will be kept completely confidential by the Housing Service. Collecting this data allows us to monitor whether or not we are achieving equality of opportunity for tenant and resident involvement in housing services.



FREEPOST RSJC-KKBE-ABXZ
HS-Language Requests
Hull City Council
PO Box 15
HULL
HU1 2AB

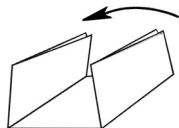
If you would like the information in this document, (or if you know of anyone who may like this information) in another language please tick the appropriate box, fill in the details and send it to the address on the back.

- Ne qofte se do ta deshironit donit, (ose njihni dike qe mund te deshiroje kete informacion) informacionin e ketij dokumenti ne nje gjuhe tjeter, ju lutemi shenoni kutine perkatese, plotesoni detajet dhe dergojeni ne adresen qe eshte mbrapa.
- إذا اردت الحصول على المعلومات في هذه الإستمارة (او تعرف احد ما يحتاج هذه الإستمارة) مترجمة الى لغة أخرى , فالرجاء التأشير في المربع المناسب و عبئها بالتفاصيل المطلوبه و ارسلها الى العنوان المذكور على خلف الصفحة.
- 如果妳想這份文件中的信息 (或者妳知道任何人可能想要這些信息) 用別種語言表達 , 請在適當的方塊中打勾 , 並填寫具體內容 , 然後寄到後面的地址
- اگر اطلاعات موجود در این داکيومنت را به زبان ديگری ميخواهيد (يا اگر فرد ديگری را می شناسيد که اين اطلاعات را به زبان ديگری ميخواهد) لطفا مربع مربوطه را علامت بزويد, مشخصات خود را نوشته کرده و به آدرس پشت روان کنيد.
- اگر اطلاعات این جزوه را به زبان ديگری ميخواهيد (يا اگر فرد ديگری را می شناسيد که اين اطلاعات را به زبان ديگری ميخواهد) لطفا مربع مربوطه را علامت زده و مشخصات خود را نوشته و به آدرسی که در پشت نوشته شده است بفرستيد.
- Si vous aimeriez les informations de ce document (ou si vous connaissez quelqu'un qui voudrait ces informations) dans une autre langue, cochez la case nécessaire, remplissez la fiche et renvoyez-la à l'adresse au recto de cette feuille.
- قطر دتتويٲ هتريٲتيك لتو زانياريانةى ناو نتم بلاوكر اوت بة زمانىكى تر دتست كتويٲ. بو خوت (بان هتريٲتيك كة دتيناسى) نٲوا ضوارطوشةكٲى بترامبٲرى ديارى بكتو ئاشان ناو نونيشانى خوت بنوسٲويٲينير توة بو نٲو نٲدرتسةى كٲلة ئشتتوة نوسراوة.
- Если прочитав данное руководство, вы решите что вам нужна дальнейшая информация или вы знаете кого-то кому нужна дальнейшая информация на русском языке, пожалуйста заполните купон, поставьте галочку напротив интересующей вас информации и отправьте по указанному с обратной стороны адресу.
- Si Usted quiere la información contenida en este documento (o si usted sabe de alguien persona que podría ser interesada de este información) en otro idioma por favor marca la caja adecuada, llena los detalles necesarios y envíala en la dirección escrita por detrás.
- Bu belgedeki bilgilerin başka bir dilde çevirisine ihtiyacınız olursa, (veya buna ihtiyaci olabilecek birini tanıyorsanız), lütfen ilgili kutucuğu işaretleyiniz, gerekli bilgileri doldurunuz ve belgeyi arkada belirtilen adrese gönderiniz.

Name: Emri Nom et prénom Ф. И. О Tam isim 姓名 Nombre y Apellido	إسم: ناو: نام: اسم:
Address Adresa Adresse Адрес Adres 地址 Dirección	عنوان: نیشان: آدرس: آدرس:
	



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Fold and Tuck in