

How to respond or have your say

The City Council is asking for your views on the proposals set out in this leaflet.

There are three ways to respond:

1. Complete the form and hand back to your local school or leisure centre reception.
2. Download the form, complete electronically and email back.

The form can be found at: www.liverpool.gov.uk/council/consultation see School and education consultations

Email the form back to: bsf@liverpool.gov.uk

or for further information

3. Send an email to: bsf@liverpool.gov.uk

All responses/enquiries must be received by 29 October 2011.

Which neighbourhood(s) would you like to comment upon:

Which school/proposal would you like to comment upon:

Please provide your comment below referring to each school/proposal if you are commenting on more than one school/proposal:

Please continue on a separate sheet if necessary



Monitoring Information

The information in this section will be used to analyse the results of the consultation to ensure that we have a good representation of views. All monitoring data is classed as personal data under the data protection act and will be treated confidentially. We will only use this information for statistical purposes, and you are free to decline to provide your information.

Age (please tick appropriate box)

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> 16-17 | <input type="checkbox"/> 18-19 |
| <input type="checkbox"/> 20-24 | <input type="checkbox"/> 25-29 |
| <input type="checkbox"/> 30-44 | <input type="checkbox"/> 45-59 |
| <input type="checkbox"/> 60-64 | <input type="checkbox"/> 65-74 |
| <input type="checkbox"/> 75+ | |

Gender (tick as applicable)

- Female Male

Gender Identity (delete as applicable)

Do you currently live in the gender you were given at birth?

Yes/No Prefer not to say

Racial Origin (Please tick appropriate boxes)

Asian or Asian British

- Asian British
 Bangladeshi
 Indian
 Pakistani
 Any other Asian background

Black or Black British

- African
 Black British
 Caribbean
 Nigerian
 Somali
 Any other Black background

Chinese or other ethnic group

- Chinese
 Gypsy
 Irish Traveller
 Roma
 Yemeni
 Other (give details)

Mixed

- White and Asian
 White and Black African
 White and Black Caribbean
 Any other mixed background

White

- White British
 White Irish
 Polish
 Slovakian
 Czech Republic
 Any other white background
 Prefer not to say

Do you consider yourself to be a disabled person? (Tick applicable)

- Yes No
 Prefer not to say

Religion/Belief (Please tick appropriate boxes)

- Buddhist
 Christian
 Hindu
 Jewish
 Muslim
 Sikh
 Any other religion/belief (please specify)
 No religion/belief
 Prefer not to say

Sexual orientation

- Bisexual
 Gay Man
 Gay Woman/Lesbian
 Heterosexual/Straight
 Prefer not to say

Thank you for taking the time to complete this consultation.

If you would like information in another language or format, please ask us.



0151 233 3007



0151 225 3275



liverpool.direct@liverpool.gov.uk