



Equal Opportunities Information required by the DfE

Name of child.....

This is an optional form which you need not complete should you so wish.

I DO NOT WISH TO COMPLETE THIS FORM

If you wish to complete this form, please continue below:

ETHNIC ORIGIN

Please tick one box only

WHITE

White – British

White – Other European

Specify.....

White – Other

Specify.....

BLACK

Black – African

Black – Caribbean

Black – Other

Specify.....

ASIAN

Asian – Indian

Asian – Pakistani

Asian – Bangladeshi

Asian – Chinese

Asian – Other

Specify.....

Any other ethnic group – please specify.....

LANGUAGE

Please tick if English is spoken as an additional language