***Shotfield Medical Practice***

[**www.shotfieldmedicalpractice.co.uk**](http://www.shotfieldmedicalpractice.co.uk/)

**Partners:**

***Dr. Heather Lings* *Jubilee Health Centre***

***Dr. Bernard Lewis* *Shotfield***

***Dr. Hani Mahfooth* *Wallington***

***Dr. Shilen Pattani Surrey***

***Dr. Kaushal Kansagra SM6 0HY***

***Dr. Elvis Martinez* Tel. No: 020 8669 7612**

**Salaried GPs:**

***Dr. Laura Rodriguez-Benito***

***Dr. Alison Sheridan***

**Ethnicity & Language Questionnaire**

Name…………………………………………………………………………………....DOB:…………………

**What is your ethnic group?**

Choose **ONE** section from A to E below and tick the appropriate box to indicate your cultural background.

**A. White** British

 Irish

 Any other white background

**B. Mixed** White and Black Caribbean

 White and Black African

 White and Asian

 Any other mixed background

**C. Asian or Asian British**

Indian

 Pakistani

 Bangladeshi

 Any other Asian background

**D. Black or Black British**

Caribbean

 African

 Any other Black background

**E. Other Ethnic Groups**

Chinese

 Other ethnic category

**What is your first spoken language?**

………………………………………………………………………………………………………………………

**What other languages do you speak fluently?**

……………………………………………………………………………………………………………………

Please ask the receptionist if you need help with completing this form.