**Social Value Information**

|  |  |  |
| --- | --- | --- |
| Question | Number | % |
| Q1. Please confirm the number of staff your company employs |  |  |
| Q2. Please confirm the number and percentage of staff who are registered disabled |  |  |
| Q3. Please confirm the number and percentage of staff that reside in the Liverpool City Region |  |  |
| Q4. What percentage of your supply chain business is directed to suppliers in the Liverpool City Region |  |  |

**It should be noted that these questions are for social value information only and will not form part of the evaluation process**

**Name of Company:**

**Name of Person who has completed form:**

**Position in Company:**

**Date:**