

Please note: There is no fee for becoming a member

Organisation Name:

Contact Name:

Postal Address:

Postcode:

Tel. No:

Organisation e-mail:

Website:

Does your organisation use any of the following social media platforms? Tick all that apply and provide contact details of those you use

Facebook	<input type="checkbox"/>	<input type="text"/>
Twitter	<input type="checkbox"/>	<input type="text"/>
flickr	<input type="checkbox"/>	<input type="text"/>
Other	<input type="checkbox"/>	<input type="text"/>

Please give a brief description of the main activities your organisation undertakes

Can these details be published on the web as the main contact for this organisation?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

What is your organisation Type? Tick all that apply

Organisation / Community Group	<input type="checkbox"/>	Government	<input type="checkbox"/>
Subsidiary	<input type="checkbox"/>	Learning Skills and Employment Network	<input type="checkbox"/>
Branch	<input type="checkbox"/>	Local Social Economic Partnership	<input type="checkbox"/>
Partnership / Network	<input type="checkbox"/>	Statutory	<input type="checkbox"/>
Private	<input type="checkbox"/>	Stakeholder	<input type="checkbox"/>

What is your organisations current legal structure? Tick all that apply.

Unincorporated association	<input type="checkbox"/>	Industrial Provident Society	<input type="checkbox"/>
SCIO	<input type="checkbox"/>	Trust	<input type="checkbox"/>
Company Limited by Guarantee	<input type="checkbox"/>	Community Interest Company (CIC)	<input type="checkbox"/>
Partnership / Network	<input type="checkbox"/>	Statutory	<input type="checkbox"/>
Private	<input type="checkbox"/>		<input type="checkbox"/>

Scottish Charity Number: Company Number:

In which geographical area do you operate? Tick all that apply.

International	<input type="checkbox"/>	UK-Wide	<input type="checkbox"/>
Scotland Wide	<input type="checkbox"/>	Local Authority Wide	<input type="checkbox"/>
More than 1 Local Authority Area	<input type="checkbox"/>	Specific local neighbourhoods	<input type="checkbox"/>

Where is your main area of delivery? (Please select only one)

Paisley	<input type="checkbox"/>	Renfrew	<input type="checkbox"/>
Foxbar	<input type="checkbox"/>	Glenburn	<input type="checkbox"/>
	<input type="checkbox"/>	Outside Renfrewshire	<input type="checkbox"/>

What is your primary area of work/service delivery? (Please mark main area of work/service with the number 1 and tick all others that apply)

Health	<input type="checkbox"/>	Community	<input type="checkbox"/>
Volunteering	<input type="checkbox"/>	Housing/Homeless	<input type="checkbox"/>
Childcare	<input type="checkbox"/>	Youth	<input type="checkbox"/>
Elderly	<input type="checkbox"/>	Disability	<input type="checkbox"/>
Ethnicity	<input type="checkbox"/>	Environment & Conservation	<input type="checkbox"/>
Culture	<input type="checkbox"/>	Leisure & Sport	<input type="checkbox"/>
Counseling/Support Services	<input type="checkbox"/>	Education / Training	<input type="checkbox"/>
Political	<input type="checkbox"/>	Social Justice	<input type="checkbox"/>
Financial Services	<input type="checkbox"/>	Other	<input type="checkbox"/>
Please Specify			

What is the annual turnover of your organisation?

£0 - £10,000	<input type="checkbox"/>	£10,001 - £50,000	<input type="checkbox"/>
£50,001 - £100,000	<input type="checkbox"/>	£100,001 - £250,000	<input type="checkbox"/>
£250,001 - £1,000,000	<input type="checkbox"/>	Over £1,000,000	<input type="checkbox"/>

Do you consider your organisation to be a Social Enterprise?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

As an organisation do you recruit volunteers? (If so, approximately how many)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Number of volunteers	<input type="text"/>		

Would you or someone from your organisation be willing to participate in community planning?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

By signing here, I agree that I have the requisite authority to provide this information on behalf of the organisation mentioned herein.

Signature:.....Date:.....

Please return this completed form to: Engage Renfrewshire, 10 Falcon Crescent, Paisley, PA3 1NS. This form has been reviewed to meet the criteria for the Scottish Government's MiLO initiative.