

Rural Social Scheme Office
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RURAL SOCIAL SCHEME COMMUNITY APPLICATION FORM

Section 1

1a. Contact Details:

Group Name: _____

Contact Name: _____

Contact Address: _____

Telephone Number: _____ E-mail: _____

1b. Group Officers (Name and Address):

Chairperson: _____

Secretary: _____

Treasurer: _____

Section 2

2a. What is the current legal status of your community/voluntary group? (Please tick the appropriate box)

Limited company Association

Network Co-operative

2b. Please provide a brief description of your groups experience in working on community based projects and schemes.

Section 3

3a. RSS employee numbers:

We require ____ RSS employees

Manual Workers _____ Clerical Workers _____

Section 4

4a. What community facilities are available to support the RSS?

4b. What equipment, if any, does the community already own?

4c. Project Details.

**Please fill out one of the attached Forms 1 or Form 2 giving the details of the project.
Form 1 is for General Ongoing Activity or
Form 2 is for Specific Project Proposals.**

Signed: _____ Position: _____ Date: _____

