

# Register

## Your Organisation



**1** Name of Organisation

Name of Department or Project (if applicable)

Address Line One

Address Line Two

Town  Postcode

Main/Generic e-mail (for the public)

Website

Telephone

**2** Main Contact Person

Position

E-mail

Telephone

**3** Please describe what your organisation does (approx. 50 - 60 words).  
*This information will be used to provide details about your organisation to prospective volunteers and visitors to our website, so please be as clear and concise as possible.*

**4** Who funds your organisation?  
*The purpose of gathering this information is to collate sector-wide data for statistical reporting. Select as many as appropriate.*

receive funding from	approx %
<input type="checkbox"/> Business Sector	<input type="text"/>
<input type="checkbox"/> Earned Income	<input type="text"/>
<input type="checkbox"/> Scottish Government	<input type="text"/>
<input type="checkbox"/> UK Government	<input type="text"/>
<input type="checkbox"/> Health Board	<input type="text"/>
<input type="checkbox"/> Charitable Trusts	<input type="text"/>
<input type="checkbox"/> European Money	<input type="text"/>
<input type="checkbox"/> Local Authority	<input type="text"/>
<input type="checkbox"/> Donations	<input type="text"/>
<input type="checkbox"/> Lottery including Creative Scotland, sportscotland	<input type="text"/>
<input type="checkbox"/> Other please specify	<input type="text"/>
<input type="text"/>	

5

What is your organisation's approximate income/ expenditure?

This is for our records **only** and **WILL NOT BE SHARED**.

Income £

Expenditure £

In which month is your financial year end?

6

Which of the following best describes the people you **specifically** work with?

*This will allow us to accurately categorise your organisation. Select as many as appropriate.*

- Addictions
- Advice/Information
- Advocacy
- Animal Welfare
- Arts & Culture
- Befriending/Mentoring
- Black/Minority Ethnic
- Campaigning/Lobbying
- Carers
- Charity Shop
- Child Services
- Community Council
- Community Development
- Community Facilities
- Community Forum
- Community Safety
- Community Transport
- Counselling
- Credit Union/Community Banking
- Drug/Alcohol Issues
- Education/Learning/Training
- Emergency Response/Disaster Relief

- Employment
- Equality
- Faith/Religion/Belief
- Family Support
- Fundraising/Funding
- Health
- Helplines
- Housing Association
- Housing/Homeless
- Law & Justice
- Learning Disability
- Men
- Mental Health
- Offenders/Ex-Offenders
- Older People
- Overseas Aid/Developing World
- Physical Disability
- Poverty
- Refugees/Asylum Seekers
- Self Help/Support
- Sensory Impairment
- Sexuality
- Single Parent
- Social Care
- Social Economy/Social Enterprise
- Sport/Leisure/Recreation
- Volunteering
- Women
- Young People

**7** Which best describes the area your organisation covers?  
*Select one only.*

- East Fife
- West Fife
- Central Fife
- Fife Wide
- More than one local authority
- Scotland
- UK

If your organisation concentrates on a specific locality please specify.  
*e.g. Cowdenbeath, Glenrothes, Kirkcaldy, Dunfermline, Levenmouth etc.*

**8** Please indicate whether your organisation works with individuals, organisations or both.

- Individuals
- Organisations
- Both

**9** Numbers of paid employees

Full time  Part time (less than 30hrs)

**10** Does your organisation involve volunteers in service delivery other than board/committee members?

Yes  No

If yes, how many?

**11** Number of board/committee members

**12** How many hours on average, per month, do all volunteers (including board/committee members) contribute to the work of your organisation?

**13** OSCR charity number (if applicable)

**14** What is your legal structure?

- Company
- Trust
- Unincorporated Association/Community Group
- Community Interest Company
- SCIO
- Industrial and Provident Society
- Not sure
- Other

**15** Does your organisation have any other offices/branches in Fife or Scotland?

Yes  No

Are you a branch of a larger organisation? Yes  No

Do you have branches? Yes  No

### Declaration

Please ensure that the information provided is as accurate and complete as possible.  
*This reduces the likelihood of further questionnaires being required in future.*

Your Name

Your Position in the Organisation

Date

Now that you have completed this form please return to [michael@fifevoluntaryaction.org.uk](mailto:michael@fifevoluntaryaction.org.uk)

**Thank You**

