

## **Partnership Registration Form**

Please use this form to register partnerships of **limited** significance. For guidance, refer to the Partnership Protocol.

Name of the partnership:		
Role of the Council:		
a) Lead Partner		
b) Contributory Partner		
c) Other		
Significance Rank:		
a) Limited		
b) Moderate		
c) Major		
Council Representatives:		
a) Number of Councillors		
b) Number of Officers		
Officer Detail (please list job titles of Officers numbered above)		

Corporate Aims:	
Please indicate to which of the Cour Partnership contributes (tick all that	
Community Safety	
Regeneration	
Customer Focussed Services	
Environment	
Social Inclusion	
Strategic Organisational Developme	ent 🗆
Lead Officer responsible for this p	partnership:
Name:	A
Job Title:	
Signature:	
Date:	
Head of Service:	
Name: Signature:	
Date:	
All forms must be fully completed an Partnership Team Manager).	nd sent to: Pam Brown (Chief Executive's &
Logged on Partnerships Register	:
Name:	
Signature:	
Date:	