

Corporate Aims:
Please indicate to which of the Council's six Corporate Aims the Partnership contributes (tick all that apply).
Community Safety <input type="checkbox"/>
Regeneration <input type="checkbox"/>
Customer Focussed Services <input type="checkbox"/>
Environment <input type="checkbox"/>
Social Inclusion <input type="checkbox"/>
Strategic Organisational Development <input type="checkbox"/>
Lead Officer responsible for this partnership:
Name:
Job Title:
Signature:
Date:
Head of Service:
Name:
Signature:
Date:

All forms must be fully completed and sent to: Pam Brown (Chief Executive's & Partnership Team Manager).

Logged on Partnerships Register:
Name:
Signature:
Date: