

Angus Council

Application for Participation Request

Details of Community group

Name of Community Group *

Contact first name *

Contact last name *

Address Line 1 *

Address Line 2

Town *

Postcode *

Telephone number *

Email *

Website (if available)

Please ensure that you include a copy of your written constitution or governance documentation if available:


Other public service authorities

Name of any other public service authority which the community group requests should participate in the outcome improvement process:

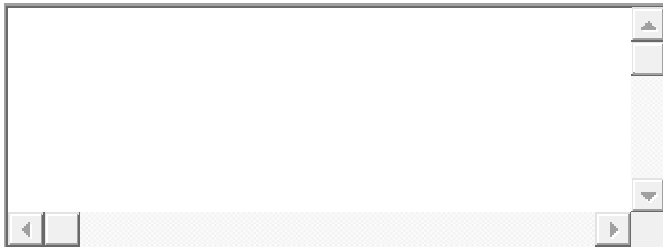
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Outcome details

The outcome that your community group wants to improve *

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Why should your community group participate in this outcome improvement process? *

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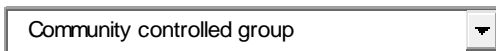
Please provide details of any knowledge, expertise and experience that your community group has in relation to the desired outcome *

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How will the outcome be improved because of the involvement of your community group *

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What type of community group are you? *

A horizontal dropdown menu with a light gray background and a thin border. The text 'Community controlled group' is displayed inside the menu, and a small downward-pointing arrow is visible on the right side.

Please add any other information in support of your participation request. If your community group has been in touch with Angus Council or another public service authority regarding the outcome, please say so and when.

Additional Information

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Does your community group require any additional support to be able to participate in the outcome improvement process?

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Submit