

**Michael & Mauritia Patcha Foundation**  
**Community Partner Identification Tool**

IDENTIFICATION OF COMMUNITY GROUP (Registered)
COUNTRY/REGION _____
NAME OF COMMUNITY GROUP _____
ADDRESS: P.O Box No. _____ DIVISION _____ DISTRICT _____
Tel. No. _____ FAX no. _____ E-mail _____
NAME AND ADDRESS OF KEY CONTACT
NAME AND FIRST NAME _____ POSITION IN GROUP _____
ADDRESS: P. O Box No. _____ DIVISION _____ DISTRICT _____
Tel No. _____ FAX no. _____ E-mail _____
CHARACTERISTICS OF THE GROUP/ASSOCIATION
MAIN AREA OF FOCUS of COMMUNITY GROUP (encircle one appropriate code) Economic Growth [1]; Agricultural Development [2]; Humanitarian Assistance [3]; Environmental [4]; Human Capacity Development [5]; Democracy and Governance [6]; Health/Population/Nutrition [7]; Other _____ [8] Number of Members: _____ Specify Year Community Group founded / / / / / / Registered by _____
SCOPE OF COVERAGE (encircle the appropriate code) A Community/Village level [1]; District level [2]; Regional Provincial level [3]; National level [4]
AFFILIATED NETWORKS of the Group (encircle the appropriate code) National [1]; Regional [2]; International [3]; Other _____ [7] (Specify)
SOURCES of Previous FUNDS of Group (list all): _____ Ceiling of funding ever-received: _____ Amount in Account _____ Account in: Commercial Bank [1]; Credit Union [2]; Other _____ [7] Specify
PUBLICATIONS by Group (encircle the appropriate code) Newsletter [1]; Pamphlets [2]; Report [3]; Articles in newspapers [4]; Manual [5] Other _____ [8]; No Publication [9] SIGNATURE/FINGER PRINT: _____ Specify
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