

**WELFARE SURVEY FORM**

1) **Name of Assembly:** .....

2) **Names, addresses and telephone numbers of your committee members: (Please attach separately to this form)**

3) **What kind of projects are you running?**

a. **Do you have a Feeding Scheme?** Yes ..... No .....

1 If "yes", how many people do you feed annually: .....

2 Do you get food donations from your assembly members: Yes ..... No .....

3 Do you get food donations from shops/supermarkets? Yes ..... No .....

4 If "yes", list the names of the shops and what they give to you:

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5 Do you get any funding for your Feeding Scheme? Yes ..... No .....

6 If "yes", state whether it is funded from the assembly or if you receive funding from people outside of the assembly:

Assembly members? ..... People outside of assembly? .....

b. **Do you have a Crèche?** Yes ..... No .....

1 If "yes", state how many children are catered for: .....

2 Is the Crèche registered with the Department of Social Services? Yes ..... No .....

3 How many staff members? .....

4 Do you receive fees from the parents? Yes ..... No .....

5 If "yes", state what the monthly income and expenditure is.

Income: .....

Expenditure: .....

c. **Do you have a job creation venture?** Yes ..... No .....

1 If "yes", state what type of job creation is provided: .....

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2 How many people benefit from the ventures? .....

3 How are these ventures funded? .....

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d. **Do you have an HIV/AIDS Programme?** Yes ..... No .....

1 If "yes", how many people do you help each year? .....

2 How is this programme funded? .....

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e. **Do you have a Counselling Programme for family issues?** Yes ..... No .....

1 If "yes", how many people are assisted every year?

2 How is this programme funded?

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4) **Are all your Projects still operating at this time?** Yes ..... No .....

If not, please provide me with the date/s when the project/s closed:

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