



## Co-op Client Intake Form

Please complete this form to the best of your knowledge. We understand you may be in the beginning stages of your project but the following questions are used by a cooperative specialist to measure where you are at in your project development and how best to assist you.

<b>Project Contact Information</b>	Are you a RMFU Member?	Yes	No	Would you like to sign up for our quarterly Co-op E-Newsletter?	Yes	No
	Person Completing the Form	Additional Person				
	Project Name					
	Address	City	State	Zip	County	
	Phone	Email address				

<b>About the Project</b>	<b>1. What developmental stage is your project/business/organization at? (Check all that apply.)</b>	
	Conceptual/brainstorming stage	Number of Staff
	Planning and organizing stage	Number of Volunteers
	Start-up stage	Number of Board Members
	Early operational stage (1-2 years operating)	Number of Steering Committee (or similar committee/group)members
	Operational stage (3 years or more operating)	Number of Members/Beneficiaries

**2. Describe the vision or mission for your project (please offer as many details as possible, even if the organization is in a very early stage).**

**3. What is the demographic and geographic focus for your project (target groups/customers and business/service regions)?**

**4. Please describe any other specific needs or plans for this project.**

**5. Include any supplementary information (for example documents attached; or URLs):**