

# COMMUNITY OUTREACH CENTRE - PROJECT PROFILE FORM

**Landscape Architecture Program**  
School of Environmental Design and Rural Development  
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Project Name: \_\_\_\_\_

Date: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Mailing Address:  
\_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Background Information:** *Please provide us with the following information if possible.*

1. Location of site (city, town, village, county and province):

\_\_\_\_\_

2. Ownership of site: \_\_\_\_\_

3. Size of site(acres/hectares):\_\_\_\_\_

4. Brief description of project:\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Proposed program or anticipated use of site (number and age of users; special user groups; types of activities to be accommodated; special activities or needs; required facilities; special facilities):

\_\_\_\_\_

\_\_\_\_\_

6. Schedule (time frame for design; time frame for site development):\_\_\_\_\_

\_\_\_\_\_

7. Groups or organizations involved:\_\_\_\_\_

\_\_\_\_\_

8. Funding available (include indication if funding available for design fees).

\_\_\_\_\_

\_\_\_\_\_

9. Please attach or use this space for any other information you would like to provide:

\_\_\_\_\_

\_\_\_\_\_