



Countryside Stewardship Facilitation Fund (CSFF)

Nominate a representative form

This form is for use by CSFF group members to nominate a representative(s) who is not a member of the group, to attend a CSFF meeting or Facilitator-led training session on their behalf. The nominated person will share their learning to the group member at a later date. The nominated person could be a farm manager, or someone connected to the business.

The nominated person will be asked to sign an evaluation form to confirm they have attended an event on your behalf.

Give the completed evaluation form to your group Facilitator. The Facilitator must send this form to us at ruralpayments@defra.gov.uk either in advance of, or when they send in the claim form as this information is needed to verify who is attending the CSFF event.

Please use the subject header 'Countryside Stewardship Facilitation Fund' when you return this form to ruralpayments@defra.gov.uk.

We must have a record of who the nominated person is who attended the event before we can pay the claim.

Facilitation group details

CSFF Reference number

Details of CSFF group member

Group member's name

Single Business Identifier (SBI)

I am a member of the CSFF group detailed above. I wish to nominate the person(s) below to attend training/events/meetings on my behalf. I declare that the information they obtain will be passed to the authorised group member and used to benefit this business in accordance with the CSFF agreement.

Sample signature

Details of nominated person (1)

Time period for representation (for example Jan-Mar):

Title and full name

Job role

Address

Telephone number

Email address

Sample signature

Details of nominated person (2)

Time period for representation (for example Jan-Mar):

Title and full name

Job role

Address

Telephone number

Email address

Sample signature

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Details of nominated person (3)

Time period for representation (for example Jan-Mar):

Title and full name

Job role

Address

Telephone number

Email address

Sample signature

Details of nominated person (4)

Time period for representation (for example Jan-Mar):

Title and full name

Job role

Address

Telephone number

Email address

Sample signature

Using and sharing your information

For information on how we handle personal data go to GOV.UK and search 'Rural Payments Agency personal information charter'.