

## Grant Application Request Form

NAME OF ORGANISATION, MEMBERSHIP AND DATE ESTABLISHED

OFFICIAL / REGISTERED ADDRESS OF ORGANISATION

CORRESPONDENCE ADDRESS (IF DIFFERENT FROM THAT GIVEN ABOVE)

DETAILS OF THE PERSON COMPLETING THIS APPLICATION ON BEHALF OF THE ORGANISATION

Contact name:

Position held:

Daytime telephone number:

Email address:

LEGAL STATUS OF THE ORGANISATION (PLEASE TICK ONE)

1. An unregistered voluntary or community organisation
2. A registered Charity in England or Wales
3. An organisation waiting to be registered as a Charity OR
4. Other (please state)

*Please state here your Registered Charity number if applicable:*

THE PROJECT

Project description:

Project background:

Project benefits in relation to this Parish, our Parishioners and Visitors:

Total cost of the project: £

Total amount of grant requested: £

COMPLIANCE WITH EQUAL OPPORTUNITIES & SAFEGUARDING TO ENSURE ALL PEOPLE RECEIVE FAIR AND EQUITABLE ACCESS TO SERVICES AND ORGANISATIONS IN THE PARISH, PROMOTING EQUALITY, ELIMINATING DISCRIMINATION, AND INCREASING OPPORTUNITY FOR ALL.

Does your organisation have a current and up to date Equal Opportunities Policy?      YES      NO

Does your organisation have a current and up to date Safeguarding Policy?      YES      NO

*Please circle YES or NO in each case as appropriate. If YES – please enclose a copy.*

#### FINANCIAL INFORMATION

A copy of your organisation's latest annual accounts must be enclosed with this application.

**In addition:**

If your accounts show a one-off or an accumulated surplus, please state the amount and what you plan to spend it on.

If your organisation holds financial reserves, please state for what purpose they are held.

If your reserves or surplus are greater than the grant requested, please explain why you have made this application. You should advise us if the reserves or surplus amounts are to fulfil statutory responsibilities.

#### SUPPORTING INFORMATION

Please attach an additional sheet if any supporting information in respect of this application is needed.

## DECLARATION

Please read the following declaration carefully and sign it. The conditions must be fulfilled by you in the event of your application for grant funding being successful.

On behalf of the organisation, I acknowledge that I have read and understand fully the Charltons Parish Council's Grant Policy and I agree to comply with the requirements therein.

I further accept that if the application is successful the organisation's promotional material will acknowledge the support of the Charltons Parish Council.

Signed:

Date:

Name:

Position within organisation:

*Charltons PC is a data controller under the Data Protection Act. We hold information for the purposes specified in our nomination to the Information Commissioner and may use this information for any of them. We may get information about you and others, or we may give information to them. If we do, it will only be as the law permits, to check the accuracy of information, prevent fraud, to detect crime or to protect public funds.*

## NEXT STEPS:

Send your fully completed application form, together with

- Equal Opportunities Statement where applicable
- Safeguarding Policy where applicable
- Latest Annual Account Statement

to the Parish Clerk @ [charltonsclerk@outlook.com](mailto:charltonsclerk@outlook.com)

or post to: The Charltons Parish Council, Portman House, North Barrow, Yeovil, Somerset, BA22 7LZ

**Please note that applications for grants will be considered only at a Full February or September Parish Council Meeting and applications must be submitted a minimum of 3 weeks before the date of that meeting.**

If your application is successful, the Parish Clerk will contact the individual making the application on behalf of the organisation to advise arrangements for payment.

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