ST PETER THE GREAT COUNTY PARISH COUNCIL GRANT APPLICATION FORM

Please complete **all sections** of this form clearly using black ink. (This is so that the details will still be readable if the form is photocopied).

A. Your Application				
Name of organisation in full				
Name and address of person making the application (to whom all correspondence will be sent)				
	Daytime telephone number:			
	E-mail address:			
Name of person/organisation cheques should be made payable to				
B. Your Organisation				
Registered charity number (where applicable)				
Year organisation established				
What does your organisation do?				
Please give aims and objectives. If you have a publicity leaflet, please attach this too				

Please state whether	St Peter's based for St Peter's people?
your organisation is:	Yes No
	St Peter's branch of a national organisation?
	Yes No
	St Peter's based serving a wider area?
	Yes No
	A local organisation partly serving St Peter's?
	Yes No
Where are your organisation's headquarters?	
What is the total Membership of your organisation?	
How many Members live in St Peters?	
Please give the names and addresses of the Officers of your Organisation?	Chairman:
	Treasurer
	Secretary

Please confirm that your organisation has a bank account it its own name and supply names of the two authorised representatives required to sign each cheque					
	C.	Grant Reques	st		
How much grant are you asking for?	£				
What is the total cost of the project?	£				
What will you use the grant for?					
How many people in St Peters do you estimate will be receiving help from the grant?					
Are funds available from other sources? (If yes, please give details)		Ye	es	No	
What fund raising efforts will your organisation be making?					
	D.	Additional Deta	ils		
Please indicate the age range of the beneficiaries of any award - eg young children / youth / adult /senior citizens					

Please attach a set of your organisation's last two AUDITED ACCOUNTS, together with details of income and expenditure for the current year. If a large reserve and/or surplus is indicated in your latest annual accounts please explain below why you are applying for additional funds.

Please provide a copy of your organisation's written Constitution

E. Statement in Support of Grant Request

Please use the space opposite to include a **STATEMENT** in support of your request.

(This must include details of how your organisation meets the 'eligibility criteria' set out in the Grant Policy information sent to you with this form)

F. Certification

I certify that the above information and the contents of the attached documents are correct at the time of applying. I understand that if any of the information is subsequently found to be incorrect this may lead to the organisation being disqualified from consideration and/or the withdrawal of any grant awarded. I agree to my organisation being bound by the eligibility criteria and any conditions set by the Parish Council.

I/We understand that any grant awarded may only be used for the purposes set out herein. I/We agree to provide a brief report when the project is completed as to exactly how the grant funds were used. Any unused portion of the grant funds must be immediately refunded to the Parish Council without delay.

SIGNED:	
PRINT NAME	
THIN NAME	
DATED.	
DATED:	