

GRANT FUNDING SCHEME APPLICATION FORM

Contact Details

1.	Name of your organisation	
2.	Primary contact name	
3.	Primary contact telephone number	
4.	Primary contact address	
5.	Primary contact email address	
6.	Position within the organisation	

Financial Background

7.	Please state the nature of your	Voluntary organisation
	organisation (circle those that	Sports Organisation
	apply) and include a copy of the	Not for Profit Organisation
	minutes of your latest AGM.	Welfare Organisation
		Cultural Organisation
		Other (please specify)
8.	Organisation Address	
9.	Registered charity number if	
	applicable	
10.	What year was your organisation	
	formed?	
11.	Please describe the main activities	
	of your organisation and any	
	services you provide to the	
	community	
12.	How many committee	
	members/paid staff/volunteers are	
	involved in the running of your	
	organisation?	
13.	Does your organisation have a	
	registered bank account in its	
	name?	

14.	What is your organisations average yearly income?	
15.	What is your organisations average yearly outgoings?	
16.	Have you applied for a grant from Witham Town Council in the past? If so when and how much?	

Project Details

17.	Project title	
18.	Project location	
19.	Anticipated start and finish date	
20.	Description of project	
21.	What evidence do you have that this project is needed by the local community?	

22.	The council prioritises applications that meet one or more of the criteria detailed in the accompanying policy. Please explain all those you meet and why?	
23.	If the project reaches fruition what will the benefit be to the local community?	
24.	How will you ensure sustainability of the project?	

25.	How will you measure success?	

Funding Specifics

26.	What is the total project cost?	
27.	Please state the total amount of grant required from Witham Town Council	
28.	Council Please break down exactly how this will be spent and include 2 quotes supporting this breakdown and showing best value.	

29.	How much has been raised so far	
30.	for this project? Please detail any funding that will be given 'in kind'	
31.	Please give details of how the balance of funding required will be sourced	
32.	How many people will benefit from this funding being given, both directly and indirectly	

Public Engagement

33.	How do you publicise the services you offer?	
34.	How will you make sure that your project reaches its intended targets	

Referees

35.	Please include the names and addresses of two independent referees who are not members of your organisation but know of the group	Reference 1
		Reference 2

I understand that if the project changes in any way, I must inform the Finance Assistant immediately.

I understand that if a completed project review report is not sent to the Finance Assistant within 6 months of receiving funding that I may be required to repay all monies received.

I am authorised to make this application on behalf of the applicant organisation and confirm that I have read, understood and accept the stipulations listed above and that the information provided in this application is accurate.

Name
Position within the organisation
Telephone number
Email address
Signature

Checklist of Documents to be Included

Copy of previous year's bank statements	
Copy of two quotes	
Copy of bank details on headed paper	
Completed and signed application form	
Copy of latest AGM minutes	
Any blank sheets used to expand on answers	