# Community Grant Scheme

##  APPLICATION FORM

**Please ensure you read the Grants Policy carefully before completing this Form:**

**Closing date for applications: 31st January**

Please complete all questions. If a question does not apply then indicate this in your answer. Failure to give the relevant information may delay your application.

For the purposes of this form the term “project” means the programme of activities,

equipment or running costs for which you are seeking grant funding.

**THE ORGANISER**

1 Name of the Organisation

 ..............................................................................................................................

2 Name of the contact person who will know about this application and the organisation.

 .............................................................................................................................

 Address or Email Address

 ..............................................................................................................................

 ..............................................................................................................................

 ..............................................................................................................................

 ..................................................................................Telephone...........................

3 Position of the contact person within the organisation

 ..............................................................................................................................

**THE PROJECT AND THE PARTICIPANTS**

4 Give a full description of the purpose for which the grant is required.

.............................................................................................................

 .............................................................................................................

 .............................................................................................................

 ..............................................................................................................

 ..............................................................................................................

 ...............................................................................................................

 ...............................................................................................................

 ................................................................................................................

 ................................................................................................................

5 Which members of the community will benefit from your organisation?

................................................................................................................

6 Will this project be open to non-residents of Frampton Cotterell ? **YES / NO**

7 Will this grant SOLELY benefit Frampton Cotterell residents **YES / NO**

**WHERE**

8 Where and when does your organisation meet?

 ..................................................................................................................

**COSTS**

9 Is your organisation a business [\_]

 Registered charity (please give charity number) [\_] …………………..

 Community group [\_]

 Other (please specify)

 .................................................................................................................

10 Project Title ...................................................................................................

 If you are applying for a specific project, please complete sections 11, 12 and 13

11 On which specific aspect of the project will the Frampton Cotterell grant be spent?

 .................................................................................................................................

 ..................................................................................................................................

 ..................................................................................................................................

12 Please give details of the other sources of your income

 Your own funds £\_\_\_\_\_\_\_\_\_\_\_\_

 Participant contributions /charges £\_\_\_\_\_\_\_\_\_\_\_\_

 Grants from: Unitary Authority £\_\_\_\_\_\_\_\_\_\_\_\_

 Other Local Authorities £\_\_\_\_\_\_\_\_\_\_\_\_

 Charitable Trusts £\_\_\_\_\_\_\_\_\_\_\_\_

 Business Community £\_\_\_\_\_\_\_\_\_\_\_\_

 Other *(Please specify)* £\_\_\_\_\_\_\_\_\_\_\_\_

 ....................................................................................................................

 **TOTAL £\_\_\_\_\_\_\_\_\_\_\_\_\_**

13 Amount requested from Frampton Cotterell Parish Council **£\_\_\_\_\_\_\_\_\_\_\_\_\_**

14 Please provide your bank **Account no:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

and **Sort Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OR** Please provide the name of the account a cheque should be made payable

 .....................................................................................................................

15 What do you see as the main benefits of your organisation to the Frampton Cotterell community?

 ......................................................................................................................

 ......................................................................................................................

 ......................................................................................................................

 .......................................................................................................................

 .......................................................................................................................

 .......................................................................................................................

 I certify that the above information is correct to the best of my knowledge and agree to

 the conditions laid down by Frampton Cotterell Parish Council.

Signed: ........................................................ Date ..........................................

 Please enclose with this form evidence of the organisation’s current financial status

 and a statement of income and expenditure for the last 12 months period and

 return it to:

**The Parish Clerk**

**Frampton Cotterell Parish Council**

**The Brockeridge Centre**

**Woodend Road**

**Frampton Cotterell**

**Bristol**

**BS36 2LQ**