

Application for grant funding from Stanwick Parish Council

Name of your organisation:

How much are you applying for?

Section A: Your contact details

What is the name of the main contact person for this application? Please include title, first name and surname:

Your role in the organisation/project:

Your address including Postcode:

Day time telephone number:

Email address:

Please give a second contact

What is the name of the second contact person for this application? Please include title, first name and surname:

Your role in the organisation/project

Your address including Postcode:

Day time telephone number:

Email address:

Section B: Your Organisation

What kind of organisation are you? Please tick as appropriate:

- a) Voluntary organisation/community group
- b) Charity (please give charity number)
- c) an individual
- d) other (please give details)

If your group has a website, please give the web address:

Should your application be successful, please state how the cheque should be made out or **provide details for a BACS payments:**

Name of Account
Sort Code
Account number
Personal or Business account

Section C: The Purpose of Your Organisation

What are the main aims and activities of your organisation?

What is the main geographical area that will benefit from this grant?

What's the start date of your project?

What's the finish date?

Give details of all financial support your organisation has previously received from Stanwick Parish Council, including the financial year, a description of the project and the amount awarded.

Section E: People who will benefit from the funding

How many people will benefit from this funding?

- | | | | | |
|---------|-------|-------|--------|---------|
| 1-10 | 11-25 | 26-50 | 51-100 | 101-250 |
| 251-500 | 501+ | | | |

What proportion of those benefiting are resident in Stanwick?

Declaration

I confirm that, to the best of my knowledge and belief, all replies given on this application form are true and accurate.

I have authority from my organisation to make this application.

I have read the Conditions and agree to be bound by them.

I understand that I may be required to provide further documentation prior to the grant being agreed and/or released.

I agree by signing below that the Council may process my personal information for statutory purposes, providing information relating to this grant application and corresponding with me about the organisation I am representing or its activities.

Signed:

Date:

Name:

Please complete and return this form to:

Stanwick Parish Council, 29 Hill House Gardens, Stanwick, Northants NN9 6QH

Clerk.stanwickpc@outlook.com

If you have any questions about completing the application form or require any assistance, please contact the parish clerk by
Email: clerk.stanwickpc@outlook.com
Tel: 01933 625616

For council use:

Amount of grant awarded.....

Date.....Minute reference.....

Power used.....

Cheque/**payment issued**.....