**Haverhill Town Council**

**Grant Application Form**

**This application form contains the following sections:**

**Section A: About you**

**Section B About your project (aka activity/service/event)**

**Section C Budget**

**Section D Declaration**

# **Section A About you**

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|  |

1. Name of Organisation

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is this application a consortium/partnership bid? | Yes |  | No |  |

If yes, name(s) of other organisations involved:

|  |
| --- |
|  |
|  |
|  |

2. Address of organisation

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Postcode |  |
| Telephone |  |
| Email |  |

**3** . Please give the following details for the main contact person.

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Postcode |  |
| Telephone |  |
| Email |  |

We will send acknowledgement of receipt of your application by email to this contact.

**4. Please give the names of the following officers (where relevant)**

|  |  |
| --- | --- |
| Chairman |  |
| Secretary |  |
| Treasurer |  |

**5. Attach your Most recent audited or certified accounts (must not be more than 18 months old and be signed)**

Accounts attached (tick)

**6. Please confirm the following documents are available for inspection if required:**

The constitutional document that governs your organisation (tick)

Your Equality and Diversity policies (tick)

**(Do not send them unless we request them)Section B – About Your Project/Service/Activity/Event**

**(For convenience, we have used ‘project’ throughout this form, but do not get hung up on this)**

# 7. Please describe the project for which you are applying for funds

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We also need the following detailed information provided separately (300 words Max):

1. Number of clients/members/public served (where relevant)
2. Description of service/activity provided, project or event to be supported
3. Reason for application with details of how the grant will be used
4. How the grant will benefit the town and people of Haverhill

Use no more than one side of A4 paper. Do not send supporting documentation – we will ask you if we require more information.

8. Where will this take place?

Please give us the address and postcode of the main site of your project. If you project is taking place over a wider geographic area, please tell us the main areas where the project will take place.

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9. Have you previously received funding from Haverhill Town Council?

If you have received funding in the last three years, please list below the year, purpose and amount of funding received.

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| --- | --- | --- |
| **Year** | **Purpose** | **Amount** |
|  |  |  |
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**10. How would Haverhill Town Council support be acknowledged?**

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# **Section C Budget**

This budget should be for the **total cost** of the activity you are applying to do. Do not pluck figures out of the air as you will be asked to explain any amount which is unclear. Attach a separate budget sheet if you have done this work already.

|  |  |  |
| --- | --- | --- |
| **A Expenditure items** | **Unit Cost £** | **Total £** |
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|  |  |
| --- | --- |
| **B Total Expenditure (must be sum of A above)** | £ |

|  |  |
| --- | --- |
| **C Other Income Sources** (State from whom, and if confirmed) | **Total £** |
| From your own resources (including public fundraising) |  |
|  |  |
|  |  |
|  |  |
|  |  |
| From Non-Statutory Grant making Bodies and other public authority funding |  |
|  |  |
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| --- | --- |
| **D Sum requested from Haverhill Town Council** | **£** |
| **E Total Income (must be sum of C & D above) and equal to figure in B** | **£** |

# **Section D Declaration**

Data protection and freedom of information

We are committed to transparency and accountability. This includes being clear about how we assess and make decisions. A list of all grants made by the Council will be published on our website. Acceptance of this is a condition of grant funding.

As a public body we follow the Data Protection Act 1998 and the Freedom of Information Act 2000. For further information, see details on our website at www.haverhill-tc.gov.uk

**Declaration**

We will take your signature on this form as confirmation that you understand our obligations under the Data Protection Act 1998 and the Freedom of Information Act 2000

*I confirm that I have the authority to sign this application.*

## I confirm that the information in this application is true and correct.

Your signature *[digital signature acceptable]*

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|  |

Name (Use CAPITAL LETTERS)

|  |  |
| --- | --- |
| **Date:** |  |

## Return this application form to The Town Clerk, Haverhill Town Council, High Street, Haverhill CB9 8AR, with all necessary supporting information.

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Form Date: May 2015