***It is important that you read these notes in relation to each question. This will ensure that the application submitted contains all the information required. Incomplete answers will delay your application.***

1. **AMOUNT**

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| **Amount Requested**  Please clearly state the amount you are requesting from the Town Council. |
| **Name of Charity/Organisation**  State the name of your charity, organisation, company or group. |
| **Charity Registration Number or Ltd Company Number**  Please state the relevant number. If the number is not available, please state why and enclose your constitution. |
| **Does your organisation make grants to others?**  Yes or No.  Usually, if an applicant makes a grant(s) itself, it will automatically not be eligible for a grant from the Town Council.  However, the Town Council may award a grant if the applicant is giving a grant/donation to an umbrella, subsidiary or associated organisation, and the Town Council considers a grant is still merited. |
| **Would your project, purchase or organisation be at risk if this grant application is not approved?**  We would like to understand whether your project or organisation would be able to continue without this grant application being accepted by the Town Council. If you feel that it would be at risk or may not happen at all, please tell us why you feel that is the case. |

1. **APPLICATION DETAILS**

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| **Name**  Please provide the name and position held in the organisation of the individual making the application. This person would be who we would contact in the event of any queries. |
| **Address**  Please provide complete address details. This will be the address to which the grant cheque will be sent. |
| **Tel No**  A contact number for the person named as the applicant. |
| **Email**  This is the email address of the person named as the applicant. |

1. **PURPOSE**

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| **Annual Running cost for support**  Are you applying for costs that would support an organisation with their annual running costs? |
| **Specific project support / one off item**  Is this request to enable a specific project? Or does your organisation need to purchase an item(s) as a one-off expenditure that your organisation would be unable to meet the cost of on its own? |
| **Funding towards an event**  Is this a request to help fund/support an event? |

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| **Use this space to briefly state why you are requesting funding; for example, describe your project or event or state the one-off item you wish to purchase and why. If you are requesting funding for annual running costs, please briefly describe the purpose of your organisation and how the funding would be used.**  Please briefly tell us about your organisation, it’s purpose/aims etc and provide a short summary of what your project or event entails. Or detail the item(s) that need to be purchased and why. |

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| **Does your organisation fund raise?**  If so, please give details for the current and previous financial years, including the amounts raised. |

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| **Which Demographic does your organisation support?**  Please tell us which demographic is supported by your organisation or to which your project/event is aimed. The Town Council is here to support the residents of Wimborne Minster.  Please indicate where possible, the numbers you support, the membership or user levels, of Wimborne Minster residents |

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| **Please complete the table on Appendix A regarding the Town Council’s Priorities**  For specific details of our priorities, please see the list of Town Council Priorities enclosed with your application pack or visit our website <http://www.wimborne.gov.uk/the-town-council/priorities-of-the-council/>.  Any grant awards we make must be aligned with at least one of our priorities.  Please tell us which one(s) of those priorities you feel your project or item helps to support and why. |

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| **Is your organisation/project/event accessible to disabled and other minority groups?**  We would prefer that organisations, events, and projects that the Town Council supports are in some way open and accessible to those with accessibility issues.  If you feel that your organisation or specific project will be accessible, please explain how. |

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| **Do you anticipate needing to apply for grants each year from this Council?**  If you feel that your organisation will require ongoing support from the Town Council, please inform us by ticking either yes or no. |

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| **Will any grant awarded be ring fenced within your accounts for use in Wimborne Minster only?**  Please tell us whether this grant will be placed within a budget whereby it will be spent only for use within Wimborne Minster. |

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| **Have you applied to any other organisations for grants for the same project/item/event/running costs?**  If so, please indicate to whom you have applied, the amount and when you expect to know whether the funding will be awarded. |

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| **Project / Item Details**  Please provide a breakdown of the costs involved, what they relate to and how you intend to fund the cost of your project, item or event.  If you are applying for a grant towards annual running costs you do not need to complete this section. Please move on to section 13. |

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| **Checklist**  Please read through your application carefully and ensure that, where appropriate, you have included the information specified |

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| **Bank Details**  If your application is successful, grants will be paid by BACS transfer. Please therefore provide your organisation’s bank details.  These details will only be used for purpose of making the payment of a grant resulting from a successful application for Grant Aid.  If your application is unsuccessful, this page will be destroyed as soon as the result of your application is known, and the data will not be retained.  Please see the Council’s Grant Aid Privacy Notice for further information. |

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| **Conditions**  Please read the conditions carefully and make sure that you understand them before signing the form |

**16.**

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| **Declaration - Signed and Dated**  The person named as the applicant in question 2, should sign this application form and date it as the day of submitting the application.  **This section must be signed.** Failure to do so will result in a delay in processing your application until a signature is obtained**.** |
| **Print Name**  Please clearly print your name underneath your signature. |
| **Position**  Clearly state the position you hold in the organisation or group that you are making this application on behalf of. |