

# GREAT AYCLIFFE TOWN COUNCIL

# GRANT APPLICATION FORM

## SECTION A

### Information About Your Organisation

1. Name of Organisation:

2. Address:

3. (i) Name of Contact Person for Correspondence:

(ii) Status in Organisation:

4. Contact Address (if different to the above):

Email Address:

5. Daytime Telephone Number:

Mobile Number:

6. What Type of Organisation is it: (Please circle or tick)

Charity

Community Interest Company

Community or Voluntary Organisation

Other Not for Profit Organisation

Other (Please State) ………………………………………

7. If your Organisation is a Registered Charity please give the registered number:

8. When was your Organisation formed?

9. (i) Please Describe Your Organisation

*This should include the main activities and services provided, numbers of staff, volunteers and users, sources of funding and your principal aims and objectives of your Organisation.*

(ii) Please enclose a copy of your Organisation’s Constitution: Included / N/A

(iii) Please enclose a copy of your Safeguarding Policy: Included / N/A

*(iv)* Please enclose a copy of your Public Liability Insurance Certificate:Included / No

10. Approximately how many members does your Organisation have who will benefit

from the grant:-

* who reside within the parish boundary of Great Aycliffe …………..

* who reside outside the parish boundary of Great Aycliffe …………..

11. (i) Please enclose a copy of your most recent audited accounts

(ii) Please enclose a copy of your most recent annual report

(iii) Please provide details of your account balances at the end of the last month:-

Account Balance £ ……………………….

Account Balance £ ……………………….

## SECTION B

### Your Grant Request

12. For what purpose is the grant to be used?

Please highlight how the grant will be used to benefit the community of Great Aycliffe and how the success of your project or initiative will be measured.

*Please use additional sheets if necessary to give full details.*

13. (i) What are the costs and income involved in your project or event?

Please give both income and expenditure projections where relevant.

**Expenditure Item £**

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**Total** …………………….

**Income Item £**

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………………………………………………………… …………………….

**Total** …………………….

**Net Cost (Expenditure less Income): Total ………………….**

**(ii) How much Grant are you requesting? £ …………………..**

(iii) How will your organisation raise the balance of funding required?

iv) What are your project start and end dates?

Start Date …………………………. End Date ………………………….

16. Please supply any further information in support of your application, (please use an additional sheet if necessary).

**17.** **DECLARATION:**

On behalf of the Organisation named overleaf, I apply to Great Aycliffe Town Council for grant aid and declare, to the best of my knowledge, that the information given on this form is true and correct.

I enclose the Organisation’s latest audited accounts, the annual report (*if available)* and constitution.

I agree to comply with the attached grant terms and conditions.

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

Position held in the Organisation: ………………………………………………..

*The information on this form will only be used for the purposes of considering your grant request. Under the provisions of the GDPR, your personal data will be treated in a secure and confidential manner and will not kept for longer than necessary. This is explained in more detail in the attached GDPR Privacy Notice. If you have any questions about the personal information that we hold about you or wish to exercise your relevant rights under the GDPR, please contact The Data Controller, at the Council Offices, School Aycliffe Lane, Co Durham, DL5 6QF, or by email at info@great-aycliffe.gov.uk.*

Please return the completed Grant Application Form to:-

Council Offices

School Aycliffe Lane

Newton Aycliffe

Co Durham

DL5 6QF

Or email a scanned copy of the form to info@great-aycliffe.gov.uk