



Alderley Edge Parish Council

GRANT FUNDING APPLICATION FORM: ORGANISATIONS

Please complete every part of this application form. Inadequate completion will prejudice consideration of your application. If you are unable to complete any section, please give reasons why (e.g. because you are a new group).

DETAILS OF ORGANISATION

Name: **Year Established:**.....

Contact Address: **Telephone No:**.....

.....

.....

Contact Person:

OVERALL PURPOSE OF ORGANISATION

Aims and objectives (Mission Statement) of the Organisation and details of how your Organisation benefits the local community

REASON FOR WHICH FUNDING IS SOUGHT

Please describe the reasons for which grant-aid is requested. If any estimates for any proposed project have been obtained, please supply copies.

GRANT REQUESTED

Amount: £..... **Name of Payee:**

SERVICE STATISTICS

Please give relevant information concerning the number of people benefitting from the organisation's services (e.g. number of attenders, residents, members), currently and for the previous year, if possible. Please also supply brief details of your staff (both employees, if any and number of volunteers).

PLEASE GIVE DETAILS OF YOUR MEMBERSHIP AND GEOGRAPHICAL AREA THE ORGANISATION COVERS / DRAWS ITS MEMBERSHIP FROM. IS MEMBERSHIP RESTRICTED IN ANY WAY?

FUNDING

Please attach your organisation's income and expenditure and balance sheet accounts for the last twelve months. Please comment below on any details in these accounts you may feel needs explanation.

FINALLY...

1. Are you a registered charity ? Yes/No

If yes, please state number:

2. If you are not a registered charity, do you have a written constitution ? Yes/No

If yes, please supply a copy together with the names of your management committee (if any).

3. Have you applied elsewhere for assistance ? Yes/No

If yes, please provide details

4. Please give the expected completion date of your project.

SIGNATURES

To the best of our knowledge the information provided in this application is correct. We understand that making this application does not guarantee that any funding will necessarily be approved. We agree to advise the Council of any changes to the details provided.

Signed on behalf of the organisation:

Chairperson: **Secretary:**

Name: **Name:**

Date:

NOTES

1. In order to reach a decision on your application Alderley Edge Parish Council may ask for further information or that you attend an interview (or both).
2. Alderley Edge Council reserves the right to monitor any grant it may make and to require you to produce receipts or other evidence that the grant has been used properly.
3. It is recommended that you retain a copy of the application and supporting papers.