



NEW FRANKLEY IN BIRMINGHAM PARISH COUNCIL

GRANT APPLICATION

Please answer all questions – failure to do so may result in a delay in the determination of your application

Q1 Contact Details

Name of organisation making application:

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Name of your project (if this is different):

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Name of contact for this application

Title : First Name: Surname:

Position held in the organisation:

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Contact Address, including full postcode:

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.....

.....

..... Postcode:

Contact Telephone Number:

Email address:

About your organisation

Q2 What type of organisation are you?

Tick (✓) relevant category:

Registered Charity: () Charity Registration Number

Voluntary Organisation: ()

Company Limited by Guarantee: ()

Other – Please specify:

Q3 When was your organisation established?

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Q4 Briefly describe the purpose of your organisation.

Description of your Organisations activities – Please list your aims and objectives
(If you are a new organisation, describe the services/activities you plan to provide.)

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Q5 Please detail any training your group has undertaken or plan to undertake in the future.

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Q6 If you are a subsidiary of a larger organisation, please state which one

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Q7 Does your organisation have an agreed constitution or Memorandum of Association?

Please state which and attach a copy:

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Q8 Previous Applications

If you have applied for and received funding from the Parish Council in the past please provide details of the amount, the year and briefly what the funding was used for.

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Details of the project or activities you are planning

Please note that if your organisation is applying for a grant which is broadly similar to a project which the Council has previously considered and approved and which is still operating and has funding, the Council reserve the right to reject your application until such time as the original project has been completed.

Q9 Describe the projects/activities you plan to use this grant for.

Try to be specific about what you will do and how you will do it.

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Please state how you have identified this need and how the project will benefit the people of Frankley together with the estimated time span.

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Estimated Time Span

If this is an ongoing project, please detail how the project will be sustained?

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Q10 What criteria will you use to measure the success of the project and how many people from the parish do you expect to benefit for the project/activity?

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Q11 What, if any, special safety issues are related to your project/activity?

Please provide the following information –

i) What kind of insurance does your organisation?

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ii) Do the leaders have the relevant qualifications and/or experience?
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iii) What policies does your organisation have in place (i.e. Health and Safety, Safeguarding etc.)?
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Q12 Please provide details of the amount of funding you need for your project and give us a breakdown of what the money is for (please enclose any relevant estimates or details).

Tell us the amount of grant requested £..... and provide a detailed breakdown as to how you have reached this figure i.e. the cost of materials and other purchases.

N.B> For applications over £1,000 the Council reserve the right to pay the grant by instalments, payments of which will be subject to the applicant achieving agree targets within an agreed time scale.

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Tell us how much money the project will cost in total: £.....

How much money has been raised towards this sum: £.....

Please list the amounts and sources of funds that you expect to receive for other funding sources:

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Q13 Any other information which you consider to be relevant to your application.

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Q 14 Please give us your bank or building society account details

You can only apply for grant if you have a bank/building society account in the name of your organisation. We will only pay grants into an account which requires at least two people to sign each cheque or withdrawal. **These people should not be related.**

Account name:

Bank/building society name:

Bank/building society address.....

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Who are the signatories and what position do they hold in your organisation?

- | | | |
|---|------------|----------------|
| 1 | Name | Position |
| 2 | Name | Position |
| 3 | Name | Position |

Q15 All applications must be accompanied by the following information. If you do not supply this information, your application will not be considered unless previously agreed in writing by the Council.

- i) A copy of your latest approved statement of Income and Expenditure or other financial report which indicates your financial position, or**
- ii) Photocopy of bank statements covering the past 6 months**
- iii) A statement of your capital assets**
- iv) A copy of your group's constitution and date of the most recent AGM and the minutes thereof**

If you are unable to provide this information, please contact the Parish Council for advice before submitting this application.

Q15 Declaration

Please give details of a senior member of your organisation.

For example, this may be your Chairperson, Treasurer or Secretary. They must read the application and sign below. **(This must not be the main contact name in Q1).**

I confirm, on behalf of (insert name of organisation):

That I am authorised to sign this declaration on its behalf, and that, to the best of my knowledge and belief, all replies are true and accurate.

I confirm that I have read the Terms and Conditions set out in the Notes which accompanied this application and further confirm that this application is made on the basis that if successful, the organisation will be bound to use the grant only for the purpose specified in this application, and will have to comply with those Terms and Conditions and any others which the Council might attach to the Grant.

Post held in organisation:

Title First Name: Surname:

Contact address:

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..... Post Code

Telephone:

Signed: Date:

Q16 Signature of Person Completing the Application

This must be the signature of the person named in Q1 as the main contact and **not be the same person who has signed in Q15**

I confirm that, to the best of my knowledge and belief, all the information in this application form is true and correct. I understand that you may ask for additional information at any stage of the application process.

Signed: Date:

Please return your completed application form to:

**Parish Clerk
Clerk to the Council
12 Arden Road
Frankley
Birmingham B45 0JA**

Tel: 0121 457 9410

Email: newfrankleyparishcouncil@gmail.com