

# LOSTWITHIEL TOWN COUNCIL Grant Application Form

Notes to Applicants	
To help us process your application quickly, please:	
<ul> <li>Read the Town Council's Grant Policy carefully to ensure your request is elected.</li> <li>Complete the application fully and include the supporting information lists below – this will avoid delays in progressing your application.</li> <li>Let us know if you have any questions before sending in your application.</li> </ul>	
Checklist for Applicants	
If you can tick ALL the boxes below you are eligible to apply for a grant:	
<ul> <li>Your project has not already started or been completed</li> <li>Your organisation has a bank account in its own name with at least two authorised signatories named on the account (grants cannot be paid to</li> </ul>	
individuals)	
Your project will benefit the people of Lostwithiel	
Your project <b>does not</b> have party political links	
<ul> <li>Your project is not for the purposes of animal welfare</li> </ul>	
<ul> <li>Your project does not discriminate against groups with protected</li> </ul>	
Characteristics as outlined in the Equality Act 2010	
FOR OFFICE USE ONLY: Date Received: / /	

Applicant Name: (Responsible for any award)				
Position:				
Organisation's full name and postal address including postcode:				
Telephone Number:				
Email:				
Contact address: (if different from above)				
Contact telephone number: (if different from above)				
More details about your organis	sation			
Voluntary Group: delete as applicable	YES/NO*	Registered C delete as applica		YES/NO*
Community Group: delete as applicable	YES/NO*	Company lim delete as applica		ntee: YES/NO*
Not for Profit Organisation: delete as applicable	YES/NO*	Social Enterp		YES/NO*
Other: (please specify)		Charity Numb	oer:	
		Company Nu	mber:	
What is the current membership	o?:	Adult	Child	As @ dd/mm/yy
Do you have a constitution or a governing rules?	set of	YES/NO* Delete as applicable	this application. I	ovide a copy with f no, please nent structure on a

Does your organisation (please	tick)	Tick
Own its own land/premises/fac	ilities	
Hire private land/premises/faci	lities	
Hire local Authority land/premi	ses/ facilities	
Lease the land/premises/faciliti lease expiry dates/length of lea	•	
How many staff, paid or otherworganisation:	wise, are involved with your	Please state number below
Number of paid full-time staff		
Number of paid part-time staff		
Number of paid casual staff		
Number of unpaid full-time state	ff/volunteers	
Number of unpaid part-time sta	aff/volunteers	
Number of unpaid casual staff/	volunteers	
Are there any Members of Lostwithiel Town Council on your Committee? (if so, please list them)  What geographical area does your organisation cover?		
How long has your organisation been in existence?		

Please be aware for all applications, the applicant must deliver a presentation to Lostwithiel Town Council

## 1. Organisation Background

Have you ever applied or received a grant from Lostwithiel Town Council within the last 5 years?  (Please list – continue on a separate page if necessary)
Date applied:
Project?
Amount applied for:
Were you successful:
Notes to Applicants
What are the main aims and objectives of your organisation?
What are the main activities of your organisation?

(please enclose any relevant policies)		
		Yes / No Or N/A
Is this a retrospective grant	application?	
Are you part of a religious a	group?	
• •	hurch – please ensure you have explained grant, the grant cannot be for religious	
	school – please ensure you have explained grant and that it will benefit the wider	
• •	n education, health or social service ork in partnership with other groups?	
• •	n education, health or social service bosed project in addition to statutory	
2. Your Project		
Start Date (cannot start prior to the approving Council meeting)		
Finish Date		
Total Cost of Project		£
Grant Applied For		£

**Project Title:** 

<b>Description of Project</b>	
-	
(please continue on a	
separate sheet if	
necessary	
Miles and the Alexander College	
Where in the Town will	
the project/activity	
take place?	
Who will benefit from	
the project?	
(please tell us what	
groups will benefit	
and approximately	
how many people will	
benefit in total)	
What evidence do you	
have that this project	
is required?	
(This might be survey	
work or statistical	
evidence)	
•	
What support have	
you received for this	
project? (Please tell us about	
any expressions of	
support you have	
received from outside	
your organisation)	
How will the project be	
managed and how will	
you measure its success?	
3000033!	

Please give the timescale and key milestones for your project, including a start date and finish date.	
What arrangements do	
you have in place to	
ensure safeguarding of	
children and young	
people	
(applicable only if your	
project involves working	
with this client group)	
What will the money be	
spent on? (Provide a full breakdown of project cost(s) identifying what cost(s) this grant would be spent on)	

Please list any applications you have made for funding from other organisations in the table below:

Organisation	Contribution Sought (£)	Applied? (Yes / No)	Granted? (Yes / No)

#### 3. Further information enclosed Checklist

	Enclosed Yes / No Or N/A
A copy of your organisation's most recent bank statements (mandatory)	
Copies of all relevant Employer, Building & Public Liability Insurance Certificates & Title Deeds if appropriate (mandatory)	
A copy of your constitution and articles of association (or similar documents if the above do not exist, showing the organisation's status)	
A copy of your organisation's latest set of accounting statements (if any exist)	
Copies of any letters of support for your project	
The bank account your project is using is in the project's/organisation name with at least 2 authorised signatories required to sign each cheque or online payment	
I have read the Privacy Notice at the end of this form and placed an 'x' in the	
Other (please list)	
If any of the above documents have not been enclosed, please give r	easons why:

### 4. Declaration by the applicant

I/We declare that, to the best of my/our belief, the information given on this application

form and in any enclosed supporting document is correct.

I/We declare that, I/we have read the Council's Grant Policy and believe to the best of our knowledge, that we meet the criteria set out by the Policy.

I/We accept the following:

(i) that any false information we provide, even if provided in good faith, may lead to the withdrawal of the grant offered,

- (ii) a presentation is required by the applicant(s) to the Council. This will be arranged prior to any meeting by the Council staff.
- (iii) that any grant offered will be used only for the purposes set out in this application and
- (iv) that we will provide reports on progress to Lostwithiel Town Council and attend the Annual Town meeting (see section 4.1) (if appropriate).
- (v) that should any grant offered, not be used in accordance with the terms and conditions set by Lostwithiel Town Council, we undertake on behalf of the organisation to repay the outstanding amount to Lostwithiel Town Council on demand.
- (vi) that I/we will work with the Council's Communications Officer to promote the grant award and will acknowledge the funding provided by Lostwithiel Town Council in all promotional materials, media coverage & interviews, and on our website(s)/social media channels (if applicable).

Signed:	
Name(s):	
Position(s):	
Date:	

Please be aware that the decision as to whether you have been successful in your application will be communicated to you shortly after the relevant Council meeting.

#### 5. Privacy Notice

Lostwithiel Town Council takes your privacy seriously.

A full copy of the Council's Data Protection Policy and General Privacy Notice are available to download on the website: www.lostwithieltowncouncil.gov.uk/policies.

If you require the Data Protection Policy in a different format, please contact Lostwithiel Town Council: office@lostwithieltowncouncil.gov.uk

Please indicate below that you understand how your data will be processed and stored and therefore give your explicit consent for Lostwithiel Town Council to hold your data in accordance with our Privacy Policy:
Yes  No
Please return your completed form and relevant information to the Town Clerk:
Email: clerk@ lostwithieltowncouncil.gov.uk
In-person/post: Lostwithiel Town Council, Edgcumbe House, Fore Street, Lostwithiel, PL22 OBL