Shildon Town Council

Small Grant Application Form

Small Grants are for amounts up to and including £200.

1. **About your Organisation**

Name of organisation:	
Address:	
Nature of Organisation Please circle or tick the categories that best describes your organisation : Charity Charity Number (if applicable) ………………………………… Community Interest Company Community or Voluntary Organisation Other Not for Profit Organisation Other (Please State) Please enclose a copy of your Safeguarding Policy Please enclose a copy of your Public Liability Insurance Bank Statement Date organisation established	Included / NA Included/ NA Included

Brief details of the aims and objectives of your organisation	
Does your organisation work in partnership with any other organisations	Yes/No (please circle) If yes, please give details below:

2. Contact details

Contact Name:	
Position within organisation:	
Address for correspondence:	
Telephone number:	
Email address:	

3. About your application

Amount requested:	£
Outline the reason for your application and how the amount requested will be spent:	
How will the grant benefit Shildon residents/community?	
Please specify predicted number of beneficiaries	
Have you received any grant funding from the Council in previous years and if so, please detail?	
What is the planned delivery date for the project/activity?	

4. Bank details

Does your organisation have its own bank account and manage its own funds?	Yes	No
Account name:		
Account number:		
Sort code:		

5. Declaration

I confirm that the details given above are correct to the best of my knowledge and belief, all information in the application is true and correct.

I agree to any disclosure or exchange of information about the application which Shildon Town Council deem appropriate for the administration, evaluation and publicising of grant aid.

I understand that acceptance of this application by Shildon Town Council does not in any way signify that the organisation is eligible to, or will receive grant aid, or that if successful grant aid will be automatically renewed each year.

I have included an up to date bank statement.

I understand that the Council will freeze or withdraw funding or reject future applications if grant aid conditions are not met and/or there is evidence of unlawful activity, malpractice or other behaviour the Council deems improper.

Name:	
Signature:	
Date:	

Grant applications are determined by the Council during public meetings, and this application form will therefore appear in the public domain. **If you do not wish for any of your personal contact information to be included in the public papers, please specify when submitting your application.**

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 be kept for longer than necessary.

Please Note:

<u>Organisations that will not be funded</u>

Business organisations whose aim is profit

National charities (unless specific direct services are provided within Shildon)

Other organisations operating from outside Shildon (unless specific direct services are provided within Shildon, or these orgnisations contributed to the wellbeing of the town and its residents.