EWSHOT PARISH COUNCIL

APPLICATION FOR GRANT - ORGANISATION/GROUP ONLY

[The Council regret that they are unable to consider grants or sponsorships for individual persons]

Please Note: This form MUST be completed IN FULL before the Council may consider any grant application.

1. FULL NAME OF APPLICANT.

[Charity/Organisation]

……………………………………………………………………………………………........

2. FULL POSTAL AND EMAIL ADDRESS OF APPLICANT.

[Charity/Organisation]

……………………………………………………………………………………………........

……………………………………………………………………………………………........

3. Registered. Charity No.

[If applicable]

……………………………………………………………………………………………........

4. Telephone No.

……………………………………………………………………………………………........

5. Full NAME of organisation’s delegated contact.

……………………………………………………………………………………………........

6. Position/Title of nominated contact.

……………………………………………………………………………………………........

7. Please describe your organisations aims and objectives.

……………………………………………………………………………………………........

8. Does your organisation work SOLELY for the benefit of the people of EWSHOT?

……………………………………………………………………………………………........

9. If your organisation is OUTSIDE EWSHOT, how will EWSHOT residents benefit from the services you provide?

……………………………………………………………………………………………........

……………………………………………………………………………………………........

……………………………………………………………………………………………........

10. Are you seeking Grant Aid from other sources? [e.g. Hart District Council, Hampshire County Council etc]

……………………………………………………………………………………………........

……………………………………………………………………………………………........

PART 2. - ABOUT YOUR GRANT APPLICATION

11. What GRANT SUM are you applying for to EWSHOT PARISH COUNCIL?

……………………………………………………………………………………………........

12. Would you please specify what the grant would be used for?

……………………………………………………………………………………………........

……………………………………………………………………………………………........

……………………………………………………………………………………………........

13. If the grant is to be used for a PROJECT, when do you expect to start and finish?

……………………………………………………………………………………………........

……………………………………………………………………………………………........

14. Please give any additional information that you feel is relevant, or will support the grant application. e.g. Any fund raising events undertaken by your organisation, & any amounts raised.

……………………………………………………………………………………………........

……………………………………………………………………………………………........

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_