**KIDDERMINSTER TOWN COUNCIL**

**APPLICATION FOR GRANT**

Please read the Guidance Notes and Criteria before completing this form. If you would like help and advice in filling out the application, contact the Town Clerk, Kidderminster on 01562 732680.

If, after submitting this application, circumstances change that have a bearing on the application and information submitted, please contact the Town Clerk to discuss the situation.

ALL APPLICANTS SHOULD COMPLETE THIS FORM

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| **1. GROUP INFORMATION** |
| **Name of Group:** |  |
| **Address of premises*(If any)*:** |  |
| **Post Code:** |  |
| **Telephone Number:** |  |
| **Email** |  |
| **2. NAME AND ADDRESS OF CONTACT PERSON** |
|  *(To whom any correspondence and queries regarding this application should be addressed)* |
| **Name of Contact:** |  |
| **Position Held:** |  |
| **Address if different from above:** |  |
| **Post Code:** |  |
| **Telephone Number:** |  |
| **Email** |  |
| **3. GRANT APPLIED FOR** |
| **Total amount of funding requested:**  | £ |
| **Have you received funding from the Town** **Council before?**  | **YES/NO** |
| **If yes:**  |  |
| **Financial Year(s):** |  |  |  |  |
| **Amount(s):** |  |  |  |  |
| 4. **DETAILS OF ORGANISATION** |
| **Please describe briefly the AIMS AND OBJECTIVES of your organisation and the geographical area it covers:** |
| **Is your organisation (*please tick*):**   |
| **A Registered Charity?** |  |
| **A Friendly Society?** |  |
| **A Voluntary Organisation?** |  |
| **Other (*please specify*)?** |  |
| **Does your organisation have a constitution?** (*Lack of a formal constitution will not affect our decision*) | **YES/NO** |
| **Please summarise your group's activities for the past year:** |
| **5. DETAILS OF ACTIVITIES FOR WHICH GRANT IS REQUESTED** |
| **For what purpose will the grant be used?** *(Please provide a breakdown)* |
| **How will these activities benefit the community of the Parish of Kidderminster?** |
| **Are you aware of any other organisations that already provide these or similar activities in *the Parish*?** *(If yes, please give brief details and describe how your organisation liaises or works with these groups).* |
| **6. SUPPORTING INFORMATION** |
| **Please enclose a copy of your constitution, latest annual accounts and annual report with your application.** |
|  | **Enclosed** | **Not Produced** | **Other *(please specify)*** |
| **Constitution** |  |  |  |
| **Latest Annual Accounts** |  |  |  |
| **Latest Annual Report** |  |  |  |
| **7. ADDITIONAL INFORMATION** |
| **Please use this space for any additional information relevant to your application:** |
| **Please also state to whom the cheque should be made payable in the event of your application being successful:**    |
| **8. OTHER FUNDING** |
| **Have you submitted a bid for funding to any other organisation for this project?**  | **YES/NO** |
| **If you know the result of your bid was it successful/unsuccessful/amount?** |
| **9. DECLARATION** |
| **I understand that the acceptance of this application by Kidderminster Town Council does not in any way signify that the Council has agreed that the organisation is eligible for a grant.** |
| **SIGNED** |  |
| **DATE** |  |
| **POSITION IN ORGANISATION** |  |

**Please return the completed form to:**

**Town Clerk, Town Hall, Vicar Street, Kidderminster, DY10 1DB**

**FOR OFFICIAL USE ONLY**

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| **Received** | **Date to Finance** | **Request** | **Amount Granted** | **Financial Year** |
|  |  |  |  |  |