

LEOMINSTER TOWN COUNCIL

GRANT APPLICATION 2018/19

CONTACT DETAILS

Name of Group/Organisation

Address:

Post Code:

Email:

Tel No:

Contact Person

Title:	First Name:
Surname:	Position held in Group:
Email:	Telephone No:

ABOUT YOUR ORGANISATION

What type of organisation are you? Please tick all the boxes that apply:

- | | | | |
|------------------------------|--------------------------|----------------------------------|--------------------------|
| Community group/club/society | <input type="checkbox"/> | Company Limited by Guarantee/CIC | <input type="checkbox"/> |
| Registered Charity | <input type="checkbox"/> | Other | <input type="checkbox"/> |

If other, please describe:

Charity Registration Number

Purpose of your community group/organisation and how are you financed?

Please enclose a copy of your constitution. If you are not a registered charity you **must** enclose a copy of your constitution.

If you are a branch of, or related to, a larger organisation, please give details:

How many people (approximately) are involved in your organisation?

Management Committee: _____ Volunteers: _____ Paid Staff _____

Ordinary Members: _____ Others: _____

Please tick and complete if your group has any of the following:

Public Liability Insurance Maximum cover £ _____

Other Insurance (specify) Maximum cover: £ _____

ABOUT YOUR PROJECT/SERVICE

Project Title

Briefly describe your project to enable the Town Council to understand how its grant will be used:

Please provide details of the number of members of your group that live Leominster.

How many people from the parish of Leominster will directly benefit from your project?

Have you received grant funding from Leominster Town Council in the past three years? If so could you please give details of how much funding you have received (broken down annually) and provide a copy of the report submitted to the Town Council on how that funding was used and the outcomes.

--

Please provide a summary breakdown of what the money will be used for. We need this information to fully assess your application. If you have a project budget or have received estimates/quotations please enclose copies:

Item/Activity	Estimated Cost

Please provide a summary of funding sought from other sources if applicable. If no funding from other sources is being sought please explain why not.

Funding source	Estimated Grant

How much of the organisation's own money will be used towards funding this project?

£ _____

How much funding are you seeking from the Town Council?

£ _____

Does your total project expenditure include or exclude VAT?

FINANCIAL DETAILS

You must include an up to date statement of your group's financial position (a copy of the latest accounts or a treasurer's report). If you are holding substantial reserves which would cover the cost of delivering the project you are seeking grant funding for you must provide an explanation as to why this project cannot be supported from your own funds.

DECLARATION

We are authorised to submit this application on behalf of the Group and certify that the information enclosed is correct. We understand that there is no appeal procedure should this application be rejected. If Leominster Town Council gives a grant, we agreed to use it only for the purpose given and according to any conditions specified. We understand that within six months after payment of a grant, we are expected to provide Leominster Town Council with a report on the progress of this project and how the money has been spent.

Signature 1
(Person submitting form)

Date:

Signature 2
(Chairperson or senior representative of the Management Committee)

Date:

If a grant is awarded, please state who the cheque should be made payable to:

CHECKLIST

It is essential that you fill in every question and send the appropriate supporting documentation. Complete the following checklist to show what you have done. If you do not include all the information requested, your application will be incomplete and will take longer to assess or be ineligible. Please do not send any documentation other than that requested.

I have: (Please tick)	<ul style="list-style-type: none"><input type="checkbox"/> Answered every question<input type="checkbox"/> Enclosed a copy of our constitution<input type="checkbox"/> Enclosed a copy of our latest accounts and/or treasurer's statement<input type="checkbox"/> Signed the Declaration (a minimum of two signatures)
-------------------------------------	--

GRANT REQUESTS

ALL APPLICATIONS FOR FINANCIAL ASSISTANCE ARE CONSIDERED ON THEIR INDIVIDUAL MERITS. APPLICATIONS MUST BE SUBMITTED WELL IN ADVANCE OF YOUR PROJECT TAKING PLACE IN ORDER TO BE CONSIDERED AT THE APPROPRIATE MEETING

Completed Application Forms should be returned to:

The Town Clerk, Leominster Town Council, 11 Corn Square, Leominster HR6 8YP
Tel: 01568 611734 email: townclerk@leominstertowncouncil.gov.uk

Leominster Town Council will consider funding applications in 2018 at the following meetings. All applications must be submitted at least two weeks prior to the relevant meeting. No grant funding will be given retrospectively:

Date of meeting	Application receipt deadline
Monday 30 th April 2018	Monday 23 rd April 2018
Monday 25 th June 2018	Monday 18 th June 2018
Monday 3 rd September 2018	Tuesday 28 th August 2018
Monday 29 th October 2018	Monday 22 nd October 2018
Monday 17 th December 2018	Monday 10 th December 2018
Monday 25 th February 2019	Monday 18 th February 2019

Please note that requests for larger grants over £1,000 **MUST** be submitted for consideration at the April and October meetings above.

LEOMINSTER TOWN COUNCIL

Privacy Notice for Grant Applicants

Leominster Town Council is the Data Controller under the new data protection law and will use the information you provide on this form in order to contact you about your grant application.

If you are an organisation or a group the legal basis for processing this data is the necessity for compliance with a legal obligation to consider your grant request.

If you include any personal details on this grant request on behalf of an organisation or group, the legal basis for processing this data is your consent to do so. You can withdraw your consent at any time by notifying us. Our contact details to do so, or for any other queries, are Town Council Offices, 11 Corn Square, Leominster HR6 8YP.

We will keep your data for six years if your grant application is successful and for six months if your application is turned down plus the current financial year, which runs from 1st April to 31st March.

Your information will not be shared further.

Individuals have a number of rights under data protection law, including the right to request their information. You also have a right to make a complaint about our handling of your personal data to the Information Commissioner's Office <https://ico.org.uk/>

Information you provide will only be used for the stated purpose. Further information about the processing of your data can be found on our website at www.leominstertowncouncil.gov.uk

You can contact the Town Council's Data Protection Officer at 11 Corn Square, Leominster HR6 8YP.

If you agree to Leominster Town Council using and retaining your personal information contained on the grant from above to consider your grant application please tick the boxes below:

Name:
Address:
Email:
Phone:

DATE:
