**FROME TOWN COUNCIL COMMUNITY GRANTS**

**GRANT FUNDING APPLICATION FORM**

**£300 - £2000**

**How to use this form:** this form can be printed and completed by hand, or can be filled in electronically. Please try to keep your answers as short as possible, to fit into the boxes.

|  |  |  |
| --- | --- | --- |
| Name of organisation |  | |
| Name and address of the person making  the application on behalf of the organisation |  | |
| Position held in organisation |  | |
| Telephone |  | |
| Email |  | |
| Do you have a Facebook/ Twitter account/ Website that you would like to be linked to through Frome Town Council? |  | |
| Bank details  If you are successful, our preferred payment method is via BACS. | Bank name:  Sort Code:  Account Number: | |
| Have you received a grant from this Council in the last 3 years? If so, for how much and what was it for? | |  |

|  |  |
| --- | --- |
| What are the aims of your organisation? |  |
| What is the name of the project/activity you are applying for? |  |
| When will the project be started/finished? |  |

**Financial information**

|  |  |
| --- | --- |
| What is the ***total*** cost for the project/activity?  Please complete the budget breakdown attached which will be used for monitoring purposes |  |
| What is the amount of grant requested from Frome Town Council? |  |
| How much have you raised already? |  |
| Is the grant for match funding? (i.e. are funds from elsewhere dependent on our funding?) |  |
| Have you applied elsewhere for a grant, if so, which organisation(s),for how much,  and when will you know? |  |

**Criteria**

The current town council strategy has three broad areas, one of more of which your project should address in order to qualify for funding.

* Wellbeing
* Prosperity
* Environmental sustainability

Read the terms and conditions for more guidance on this (available on FTC website at http://www.frometowncouncil.gov.uk/your-community/fundraising-support-and-community-grants/)

Please tell us about your project and how your project fits with these criteria

(500 words maximum)

Additionally we’d like to know about who you are working with and the long-term impact of your. Please answer the following questions.

|  |  |  |  |
| --- | --- | --- | --- |
| 1 a) How many people will this project benefit? | | | |
| b) How many are involved in decision-making and ownership of this project? | | | |
| c) Will your project encourage more Frome residents to get involved?  If so, how? | | | |
| 2. Are you partnering with other Frome groups and, if not, could you consider doing so? | | | |
| 3. We want to know how you will be sure your project is successful. What will you be measuring and how will you measure it? | | | |
| 4. Will your project continue after this grant is spent? If so, how will it be funded? | | | |
| **Budget** (please complete the following budget for your project) | | | |
| **Title** | **Description** | **Total amount** | **Amount requested** |
|  |  |  |  |
| Management costs |  |  |  |
| Training |  |  |  |
| Office costs (rent, telephone etc) |  |  |  |
|  | Sub Total |  |  |
| Salaries |  |  |  |
| Expenses (travel etc) |  |  |  |
| Venue hire |  |  |  |
| Materials |  |  |  |
| Publicity |  |  |  |
| Volunteer expenses |  |  |  |
| Other (please specify) |  |  |  |
|  | Sub total |  |  |
|  |  |  |  |
|  | TOTAL |  |  |

**Declaration**

|  |  |
| --- | --- |
| We confirm that all the information contained within this application is true and accurate to the  best of our knowledge and belief, and that we are authorised to submit this application on behalf of the group. We have read and agree to abide by the terms and conditions  (please click/tick box to agree) | |
| We have provided copies of the following necessary documents (refer to Grant Application Information) to support the application (please click/tick as appropriate):  Accounts  Bank statement or paying-in slip  Constitution  (to double check bank details)  NB. Scanned copies are acceptable if you end your application by email.  **Applications will not be taken to committee without all these supporting documents** | |
| Signature 1 (person submitting form)  Signature 2 (Chair or senior representative of the organisation)  **Typed entries acceptable for email applications** |  |
| Date: | |

Please return your completed application form to:

Frome Town Council, Frome Town Hall, Christchurch St West , Frome, Somerset, BA11 1EB

01373 465757 [Panicciah@frometowncouncil.gov.uk](mailto:Panicciah@frometowncouncil.gov.uk)