

Application for a Grant

Before completing this form, please read carefully the attached document entitled TCP 23 – Grants Policy.

Copies of this form together with the **latest copy of your audited or examined accounts** must be submitted by **31st May 2024.**

If you have any queries on the completion of this form please contact the Town Clerk, Woodbridge Town Council, Shire Hall, Woodbridge, IP12 4LP

Email: townclerk@woodbridge-suffolk.gov.uk

Details of your Organisation:

Name of Organisation:	
Address:	
Contact Telephone/Mobile Number:	
Email Address:	
Registered Charity Number.	
If you are part of a larger organisation, enter its name:	
Principal aims and activities:	
No. of volunteers:	No. of paid workers:

Application for a Grant

Details of Grant requested:

Explain your need for a grant with the likely number of beneficiaries and their age profiles:

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Grant amount requested:

£

Bank Account details for Grant transfer *(Should application be successful)*

Account Name:	
Account Number:	Sort Code:
Bank Name:	
Reference Number (if applicable):	

Application for a Grant

Supporting Documentation

Please confirm if your organisation holds the following documentation/ policies.

Policy	Yes	No
Aims of the organisation / Constitution / Memoranda and Articles / Terms of Reference		
Equality and Diversity policies		
Protection of Children and Vulnerable Adults (Safeguarding) Policy		
Health & Safety Policy		
Risk Assessments (covering activities for which funding is sought)		
Insurance Certification covering the activities for which funding is sought		

Details of other Grants:

Received in the last 5 years:
Currently applied for:

Application for a Grant

Use this space for any significant information about your organisation not already supplied:

Use this space for any significant information about your organisation not already supplied:
Use this space to explain how Council support will be acknowledged/publicised:

I certify that the foregoing replies are accurate to the best of my knowledge:

Signature of applicant: _____

Office Held: _____ Date _____

I endorse and support this application:

Signature of Senior Person in Organisation _____

Office Held _____ Date _____