

## Application for a Grant

Before completing this form, please read the document entitled TCP 23 – Grants Policy 2026.

Copies of this application form together with the latest copy of your audited or examined accounts must be submitted by **31<sup>st</sup> May (considered in June), 30<sup>th</sup> September (considered in October), 31<sup>st</sup> January (considered in February).**

If you are not required to submit accounts, please provide your most recent organisational bank statements or the accounts from your supporting organisation.

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](mailto:townclerk@woodbridge-suffolk.gov.uk)

### **Woodbridge Town Council vision statement:**

**The Council will strive to ensure Woodbridge is a safe, harmonious, and thriving town where all residents and the wider community feel welcome.**

**We will work to make Woodbridge a place where all generations can participate in a vibrant, inclusive society that is environmentally resilient.**

We expect grant applicants to consider our mission statement as part of each application by demonstrating how your application may support us achieve our goals. Applicants may be interested in the types of funding provided in the last financial year by the Council, which are listed on our [website](#).

### **Details of your Organisation:**

<b>Name of Organisation:</b>
<b>Name of Applicant:</b>
<b>Address:</b>
<b>Contact Telephone/Mobile Number:</b>

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<b>Email Address:</b>
<b>Registered Charity Number (if applicable)</b>

### **Details of Grant requested:**

Please tell us what you need the grant for?

Please give us a short description of the overall project for which you would like a grant to be considered. E.g. is it part of a larger project or purchase, explain where/how this will happen, who you will work with and why you are doing it.

Please tell us how this will benefit the people of Woodbridge?

How does the overall project align with our vision statement? (see front page of application)

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### **Budget details:**

What is the overall budget for this project?	
How much money are you applying for from us?	

Are you are applying/have applied for any other grants for this project?  
Please provide details even if you are awaiting a response.

Do you intend to provide match-funding for this project?  
If so, please detail below:

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How do you plan on spending your grant funds? Please provide a breakdown below:

Is there any income expected? E.g. tickets sales, match funding, other donations?

<b>Expenditure</b>	<b>Detail</b>	<b>Amount</b>
<b>Income</b>	<b>Detail</b>	<b>Amount</b>
<b>Total</b> (Expenditure - Income)		

If you have any reserves, please outline them below:

Committed reserves:	
Uncommitted reserves:	
Annual Turnover: (if applicable)	

### Supporting Documentation

Please specify you type of organisation:

e.g. Registered charity, CIO, CIC, Individual partnering with an organisation. Etc.

Please note: Woodbridge Town Council does not pay grant funds directly to individuals. If you are an individual and wish to make an application for our grant scheme, you will need to partner with an organisation. If you require any further clarification, please contact Officers of the Council.

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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		
<b>Required for event applications only:</b>		
Risk Assessments (covering activities for which funding is sought)		
Insurance Certification covering the activities for which funding is sought		

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:

## Application for a Grant

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

For individual applications this will be the Supporting Organisation bank details as we are unable to make payment directly to individual bank accounts.

<b>Account Name:</b>	
<b>Account Number:</b>	<b>Sort Code:</b>
<b>Bank Name:</b>	
<b>Reference Number (if applicable):</b>	

Please tick agree and acknowledge this application is made in accordance with the grant policy and the terms and conditions set out within it.

### **I certify that the details in this application are accurate to the best of my knowledge:**

Signature of applicant:	
Name of applicant:	
Date:	

### **If applying as an individual, please provide details of the supporting organisation:**

Signature of senior person in organisation:	
Name of senior person in organisation:	
Position held:	
Date:	

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