





Shropshire Community Fund grant application form

Please refer to our fund specific guidance notes before completing this form.

If you need help and advice, please contact us on 01743 360641 or email us at enquiries@shropshire-rcc.org.uk

PLEASE DO NOT CHANGE THE QUESTIONS ON THIS FORM

1. Fund applying for: Infection Control Fund		
2. How did you hear abo	ut this grant?	
3. Name of organisation		
4. Full address of organi	sation (for correspondence)	
	Doctordo	
	Postcode:	
5. Please describe the m people per week?	ain activities of your organisation, who you help and approx. how many	
6. How many volunteer	s support your group?	

7. What type of organisation are you? If you are a charity, include your charity number.			
8. Why are you applying for this fund – how will you spend the money if your application is successful?			
9. How much are you requesting? £			
10. Which part of Shropshire do you operate in?			
12. Does your group have a bank account?	Yes / No		
13. Do you have a min of two signatories on transactions e.g. cheques?	Yes / No		

14. Contact details

Main contact person Second contact person Miss/Ms/Mrs/Mr Miss/Ms/Mrs/Mr Title: Title: (please circle) (please circle) Name: Name: Position: Position: Telephone: Telephone: Mobile phone: Mobile phone: E-mail: E-mail:

15. Declaration

Please read this section carefully. We are unable to accept an application if this section has not been completed. It will give details of how we will use the information you have provided in this form, and how we will store it.

- 1. By signing you agree that you are making an application for funding and that the information that you have provided is correct to the best of your knowledge.
- 2. You accept that if any information changes prior to an award being made you will need to notify Shropshire RCC at the earliest opportunity.
- 3. You understand that any grant awarded will only be made payable to the organisation which will benefit from the grant.
- 4. You understand that Shropshire RCC will record the information contained on this application form so that we can make an informed decision of whether we can offer you support.
- 5. You understand that if you are successful in receiving an award, Shropshire RCC will retain the information on this application form for 7 years. If you are not successful, the information will be retained for 2 years.
- 6. You understand that if more information is needed, Shropshire RCC will contact you using the details you provided on the application and you consent to this contact.
- 7. You understand to ensure that the grant is used only for the purposes stated in the application and to return any surplus grant funding which is not used for the project applied for.
- 8. You understand that Shropshire RCC may use information and images from the application form and follow up impact report for publicity purposes.
- 9. You understand that the decision of the grant making panel is final.

16. Authorised Signatures of applicants

Organisation Chair or Secretary	Committee Member	
Signature please sign	Signature please sign	
Name please print or type	Name Please print or type	
Role in organisation	Role in organisation	
Date	Date	
What next? To avoid any delay in your application completed all sections of the applicat	being heard by the Grant Panel, please make sure you have on form and send a signed copy to: Julia.baron@shropshire-rcc.ceative Quarter, Shrewsbury Business Park, Shrewsbury, SY2 6L0	
of post to. Smopstiffe Noo, 4 The of	ealive Quarter, Officwsbury Business Fair, Officwsbury, 312 oct	J.
Keeping in touch		
	ne work we do as a charity please tick the relevant boxes below. e by contacting us on 01743 360641 / enquiries@shropshire-rcc.org	
Please keep me updated on: News and Updates Grants (Si	nropshire Community Fund) □ Fundraising appeals □	

Shropshire RCC is registered to hold data under the Data Protection Act 1998.

Post □

Events

Email

Please contact me by: