BORDEN PARISH COUNCIL

SMALL GRANTS APPLICATION FORM

GENERAL GRANTS -INFORMATION

- Borden Parish Council has set aside an amount of money to provide financial assistance to locally based organisations for specific projects. The project may involve the provision of services, facilities, or events.
- ❖ Help will rarely be given for general administration or operating costs. However, this is at the Council's discretion.
- ❖ A maximum of **25%** of the total cost will be given, the current maximum value of a grant is £1000, however, these amounts are at the Council's discretion.
- Applications must be received before the project has commenced as no assistance will be given to retrospective applications.
- ❖ WHEREVER POSSIBLE THE PARISH COUNCIL WOULD PREFER TO SUPPORT A SPECIFIC ELEMENT OF AN EVENT OR PROJECT.
- ❖ The project must be completed within 12 months of any award being given.

CRITERIA FOR QUALIFICATION

Organisations wishing to apply should satisfy the following criteria: -

- 1. The organisation should demonstrate a considerable degree of self-financing and should not rely on the Council's assistance.
- 2. The organisation should be local in nature and aim to provide a service, facility, or event for the residents of the Parish.

Or

The organisation is of a regional or national nature with a local branch whose objectives are likely to have a direct benefit to the residents of the Parish.

- 3. The organisation does not seek to provide a service that is implicitly concurrent with the functions of the Borough or County Council or central government.
- 4. The organisation will complete a monitoring form on completion of the project and provide confirmation of how any grant monies have been spent.

HOW TO APPLY

If you believe that you fulfil the above criteria complete the attached application form and return it together with copies of the last two years accounts (audited if possible) to: -

The Borden Parish Council Clerk clerk@bordenparishcouncil@gov.uk

Applicants are asked to note that the fact a grant is or has been previously awarded by the Parish Council in no way commits the Council to providing funds on a subsequent occasion.

BORDEN ARISH COUNCIL - GRANT APPLICATION FORM

(Please print clearly in black pen)

ABOUT THE APPLICANT:

ORGANISATION NAME	
ORGANISATION ADDRESS	
APPLICANT NAME	
POSITION IN THE ORGANISATION	
ADDRRESS FOR COMMUNICATION	
(if different from above)	
(ii directent from above)	
TELEPHONE NUMBER	
Reason for Grant request?	
PROJECT	
PROJECT ESTIMATED TOTAL COST OF PROJECT	
PROJECT	
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST	ovide to existing and/or future members
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST	ovide to existing and/or future members
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST What benefits will the project pr	ovide to existing and/or future members
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST What benefits will the project pr	ovide to existing and/or future members
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST What benefits will the project pr	ovide to existing and/or future members
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST What benefits will the project pr	ovide to existing and/or future members
PROJECT ESTIMATED TOTAL COST OF PROJECT AMOUNT OF GRANT REQUEST What benefits will the project pr	ovide to existing and/or future members

GENERAL GRANTS -INFORMATION

Please attach a detailed breakdown of the costs and indicate if there is any specific element the Parish Council could support.

**Please note that actual projects applied for must not have commenced or goods already ordered prior to receipt of the application. If a small part of a large project is applied for, please identify the cost of this element separately.

FINANCIAL DETAILS

Please provide copies of the last 2 years accounts, audited if possible.

PROPOSED FUNDING OF PROJECT

CONTRIBUTING	AMOUNT	CONFIRMED (tick if yes)
ORGANISATIONS		
TOTAL		

Signed: Date: Description of the content of the cont	TOTAL				
	I hereby confirm that the	above information is	correct		
Please check that you have supplied all necessary supporting information.	Signed:	Date:			
	Please check that you have	ve supplied all necessa	ry supporting info	rmation.	
FOR OFFICE USE ONLY					

APPLICATION RECEIVED DATE	
ACKNOWLEDGEMENT LETTER SENT	
PERCENTAGE OF TOTAL REQUEST	
COST BREAKDOWN PROVIDED	