



Stratfield Mortimer Parish Council Community Grant Fund Application Form

Please read the Council's Community Grant Fund Policy before completing this form. You may use the continuation sheets provided if necessary. **The maximum amount for any application is £1,500.00**

Details of Organisation:	
1.	Name of organisation and any company/charity number
2.	Purpose of organisation
3.	Contact name Position in organisation
4.	Address
5.	Telephone number Email
6.	Bank account name, sort code & account number
Details of Project	
7.	Name of project
8.	Brief overview – what are you looking to provide? (max 100 words)
9.	Please describe in full your business case, including: <ul style="list-style-type: none"> • Set-up costs • Revenue costs
10.	Any supplementary evidence you feel is appropriate (max 500 words)

11.	Please describe the community benefit and levels of support for your proposal, with evidence.	
12.	What is the anticipated start date?	
Grant Request		
13.	What is the total cost of the project?	
14.	How much are you applying for in this application to the Community Grant Fund?	
15.	If the grant is for revenue costs, please give details of how these will be funded in the future.	
16.	Please give details of the funds available from the organisation's own resources for this project	
17.	Please give details of funding available from other sources for this project, including match funding where the payment of any successful Community Grant needs to be made via a funding platform i.e The Good Exchange	
18.	Please supply the additional information: <ul style="list-style-type: none"> • The financial balance of your organisation (copy of latest bank statement). • A copy of the accounts for the last financial year, or if a newly formed organisation, then a copy of the budget and business plan. • Current constitution or rules as appropriate. 	
Declaration:		
I confirm that I am making this application on behalf of the organisation named. I undertake on behalf of the organisation that any financial assistance offered will only be used for the purpose for which it has been granted, unless otherwise agreed and I agree to the Conditions of Funding. I understand that any false declaration or information may disqualify any further application.		
Name of authorised personnel:		
Signed:		
Date:		
For and on behalf of (state organisation):		

Please return the completed Community Grant Fund Application Form and additional information to The Clerk, Parish Council Office, 27 Victoria Road, Mortimer, READING RG7 3SH or email scanned copies to the.clerk@stratfield-mortimer.gov.uk.

Continuation Sheet 1

Name of Organisation:

DRAFT

Continuation Sheet 2

Name of Organisation:

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