PENISTONE TOWN COUNCIL GRANT APPLICATION FORM

For Small Grants or Area Improvement Grants

This form can be used for Small Grants for community groups.

The form can also be used to claim for activities that will make your local area better and help to make service improvements.

1. APPLICANT'S DETAILS

3. PROJECT COSTS

| Organisation Name (for cheque) | |
|--|--|
| Address | |
| Post Code | |
| Correspondence Address (if different from above) | |
| Contact Name & Phone Number | |
| Position In The Organisation/Group | |
| Name Of Project | |
| Name Of Project | |
| Name Of Project Please explain what your prolocal area (for example: the number | ject intends to do or how it will improve your er of people it will help, volunteers recruited, organisations se continue on blank sheet at end of application). |

How much are you requesting (usual maximum £500)

| What will the grant be spent on? (Continue on blank sheet at end of application if necessary) | ٤ | £ |
|---|---|---|
| | | |
| TOTAL COST | | |
| 4 FUNDING | | • |

| Have you been granted (or applied for) funding from any other source for this project? (If so, please give details) | £ |
|---|---|
| | |
| | |

5. ABOUT YOUR GROUP

| How many members/beneficiaries do you have? | |
|--|--|
| Will this increase as a result of the Grant? | |
| How many people are involved in running the group? | |
| Will this increase as a result of the Grant? | |
| What will be the benefits to your own group? | |
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| | |

6. DECLARATION

I declare that to the best of my knowledge and belief the information given in this application form and any supporting material are correct and that I have the authority/permission of our group to apply for these funds. If the grant is approved and it is found during monitoring that any item(s) funded are ineligible, I will return any money requested immediately.

| Name Signature | |
|-------------------|--|
| Signature | |
| Date | |