**DITCHLING PARISH COUNCIL**

Ditchling Village Hall 18 Lewes Road Ditchling East Sussex BN6 8TT

Tel: 01273 844733 Email: parishoffice@ditchling-pc.gov.uk

Parish Clerk: Sarah Mamoany



**Ditchling Parish Council Grant Application Form**

Please note that this application will not be considered unless it is accompanied by a copy of the latest set of accounts, showing the organisations income, expenditure and level of balances. If the organisation does not prepare annual accounts, copies of the bank statements covering the previous six months must be enclosed. With all applications we request you complete and sign the General Data Protection form, ensuring the Council has permission to hold you and your organisations data for as long as required. Please read our Grants & Donations Policy before completing the application form.

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| --- | --- | --- |
| 1. | Name of the organisation/group. | What does your organisation do? |
| 2. | Name of person completing this application  form. | Name of second person if required. |
| 3. | Your role within the organisation/group. |  |
| 4. | Contact details  Organisation/Group address or your address:  …………………………………………………………………….  …………………………………………………………………….  …………………………………………………………………….  Post code: ………………………………………………….. | Tel: ……………………………………………………………..  Email: …………………………………………………………….. |
| 5. | Is your organisation/group a registered charity?  If yes, please provide the charity number. | Charity no:  --------------------------------------------------------- |
| 6. | Amount of grant/donation are you requesting?  £ …………………………………………….  Please provide your bank details which we will use if your grant is successful. | Sort Code: ……………………………………………..  Account No: ……………………………………………  Account Name:  …………………………………………………………..  Name of Bank:  ………………………………………………………….. |
| 7. | Please provide details on how your grant will be used. | |
| 8. | What is the total cost of the project, activity or provision of service or any other reason for applying for a grant?  £ …………………………………………………………… | How will any shortfall be met? ***Please include details of any other grants you have received and the amount.*** |
| 9. | Who are your main beneficiaries?  How many people will benefit ?  How many parishioners of Ditchling will benefit? | How will your beneficiaries benefit by you receiving a grant from Ditchling Parish Council? |
| 10. | Do you have an Equal Opportunities Policy?  Yes/No | If yes please enclose a copy of the policy. |

Signed: …………………………………………………………………………………………………………………………………………….

Name and Position: …………………………………………………………………………………………………………………………

Organisation/Group Name: ……………………………………………………………………………………………………………..

Date: …………………………………………………………………………………………………………………………………………..

***Please provide any other information to support your application on a separate sheet.***