  **BIG LOCAL COMMUNITY SMALL GRANTS SCHEME**

**APPLICATION FORM**

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| **1)** | **Name of your group or organisation***Please tell us the group or organisation name as it appears on your governing document, this is likely to be a constitution. This name must match your bank statement and accounts.* |
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| **2)** | **Name of your project***Chose a short title that best describes your activities for this project.* |
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| **3)** | **Tell us about your project***Please give a brief description of your project that you want us to fund and be specific about what the funding will pay for and who will benefit from the project.* |
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| **4)** | **What evidence is there that shows this project is needed?** |
| **5)** | **Please tell us a little about your organisation***Tell us what your organisation does and who it involves. Tell us about your members, who they are and where they come from.* |
| **6)** | **Project costs and grant needed***Please fill in this table giving the total cost of each item and how much funding you need from us.*

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| **Item** | **Cost** | **Other funding** | **Big Local contribution** |
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| **Total £** |  |  |  |

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| **7)** | **Contact details***Please give the contact details of two people we can contact if we have any queries about this application.***Main Contact****Name:****Address:****Post code:****Telephone:****Email:****Second Contact****Name:****Address:****Post code:****Telephone:****Email:** |

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| **Authorisation*** **I understand that any award given must be spent as itemised within this application. Any changes must first be approved by the Big Local Partnership Board.**
* **I understand that my organisation must provide receipts and any monitoring information required by Goldthorpe and Bolton on Dearne Big Local.**

**Signed: Date:****Name: (please print)****On behalf of: (name of organisation)** |

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| **8)** | **Bank Details***We pay successful applicants using an electronic transfer, which means the money goes direct to your organisations bank account. Please attach your most recent bank statement or photocopy of a passbook with this application.***Name of Account:****Account sort code:****Account number:****Name, address and post code of bank:** |
| **9)** | **Signatories***To be eligible for your grant your account must require at least three signatories for the release of funds. Please list everyone who is authorised to sign cheques drawn from this account.***Name:****Position in organisation****Name:****Position in organisation****Name:****Position in organisation** |

**Please return your completed form to:** **Goldthorpe.bolton@cpruk.net**

**Or telephone 07879 739043 to arrange collection**

**Remember to include the following:**

* **A signed copy of your organisations constitution or governing document**
* **Most recent bank statement (or income and expenditure statements for organisations less than twelve months old)**
* **An original bank statement (or photocopy of building society pass book)**