## MALVERN TOWN COUNCIL SMALL GRANT APPLICATION FORM

SMALL GRANTS are for amounts up to and including £500.

Please refer to the Town Council's grants scheme guidance notes, available on its website, for further details and before filling in this application form.

All sections must be completed. Please continue on an extra sheet as necessary.

1. About	1. About your organisation			
Name of organisation:				
Address:				
Nature of org	anisation:			
VAT registration number (if applicable):				
Date organisation established:				
2. Contac	t details			
Contact name	e:			
Position within organisation		on:		
Correspondence address:				
Daytime telep	hone:			
Email addres	s:			
3. About	your applic	ation		
Amount reque	ested:			

Briefly outline the reason for your application and how the amount requested will be spent:
How will the grant benefit Malvern Town residents/the Malvern Town community?
How many residents of Malvern Town will benefit?
Please give a supporting statement of no more than 500 words explaining how the grant will be beneficial to your organisation and the residents of Malvern Town:
Have you received any grant funding from the Council in previous years? If so, please give details:

What is the planned delivery date for the project/activity?							
What arrangements are in place	for the delivery ar	nd management of this p	roject?				
4. Financial information							
Total cost of your project:							
What funding has been secured to date and from where?							
If Town Council funding were to be your organisation's plans for raisi		,					
		Now	Previous year				
Annual income		£	£				
Annual expenditure		£	£				
Surplus/loss for the year		£	£				
Savings/reserves		£	£				
5. Bank details							
Does your organisation have its or account and manage its own fund		○Yes	○ No				
Sort code:							

Account number:						
Account name:						
6. Supporting inf	formation to be included	Attached				
Latest available state						
A copy of your organi						
7. Declaration						
I confirm that I have read and agree to the conditions within the Town Council's grants scheme guidance notes, and that the details given above and in any supporting information are correct to the best of my knowledge.  I understand that if successful, I will be required to confirm that any grant money has been spent in accordance with the purpose outlined at section 3 of this form and will provide a written report to the Council by the date requested.  I will ensure that the contribution made by the Council is reflected in any promotional materials produced and copies of these and details of any press coverage are forwarded to the Council.  In making this application, I declare that the organisation to which the application relates subscribes to the principles of equal opportunities in all of its activities and is operated on a not-						
for-profit basis.						
Name:						
Signature:						
Date:						

Please submit your application by emailing it along with required supporting documents to Deborah Powell: <a href="mailto:dpowell@mailvern-tc.org.uk">dpowell@mailvern-tc.org.uk</a>

Grant applications are determined by the Council during public meetings, and this application form will therefore appear in the public domain. Your signature will be redacted but if you do not wish for any of your other personal contact information to be included in the public papers, please specify when submitting your application.

We will only use your personal information to contact you about your application, and other sources of funding that may be applicable. To find out more, you can view our privacy policy at www.malverntowncouncil.org/policies