Application form for the Grant Giving Fund

Strategic funding request (over £2,000)

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| Organisation name |  |
| Organisation address |  |
| Postcode |  |
| Website address |  |
| Contact name |  |
| Position in organisation |  |
| Telephone number |  |
| Email |  |
| What is the status of the organisation? Charity, CIC etc. Please give charity number if applicable |  |
| Which area or community does the area serve? |  |
| Are you registered for VAT? |  |
| Is there a bank account in the name of the organisation? |  |

Please provide a copy of:

* The Charity Deed, Scheme or other governing document for the organisation;
* Information of the trustees or management board members, if not included in above;
* The annual report, if available;
* The last two years accounts, if available, including a bank statement signed by a trustee or similar.

I declare that the Statements made are, to the best of my knowledge and belief, correct in every respect.

Signature of Applicant

Date

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| --- | --- | --- |
| INCOME | Last financial year | This financial year |
| Funding from Public Sector bodies |  |  |
| Funding from other organisations |  |  |
| Rents earned on owned properties |  |  |
| Income from other sources |  |  |
| TOTAL INCOME |  |  |

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| --- | --- | --- |
| EXPENDITURE | Last financial year | This financial year |
| Salaries |  |  |
| Training |  |  |
| Rent and building costs |  |  |
| Administration and governance costs (not salary) |  |  |
| Other costs |  |  |
| TOTAL EXPENDITURE |  |  |

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| --- | --- | --- |
| CAPITAL AND PROPERTY | Last financial year | This financial year |
| Value of any investments |  |  |
| Value of any property owned by organisation less any mortgage or loan payments on that property (attach separate sheet if necessary) |  |  |
| Address 1 |  |  |
| Address 2 |  |  |
| Length of lease of any building where the organisation is based |  |  |
| Do you have any reserves? |  |  |

If you have applied to any other organisations for this project, please list all the organisations you have applied to, including ones that have not yet decided or have rejected the application

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| --- | --- | --- | --- | --- |
| Name of organisation | Date applied | Outcome: Grant/rejected/awaiting decision | If successful: Dare grant received | If successful: Amount of grant |
|  |  |  |  |  |

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| How much is the funding application for? |
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| What is the funding application for?  Please give specific details about how the budget will be spent and what the project or funding aims are. |
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| Can you demonstrate the need for funding and local stakeholder support through consultation or other means? |
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| Who will be responsible for expenditure of the grant and/or delivery of the project? How will the outputs of the spending be measured or demonstrated to have delivered its’ aims? |
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| How will the outcomes of the grant expenditure support the aims of The Chester Bluecoat Charity and what positive, sustainable change will result from the grant? |
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| Have you been offered match funding from any other organisations? |
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| Any other comments? |
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| How did you hear about The Chester Bluecoat Charity? |
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The completed application and copy supporting documents should be forwarded to:

Charity Manager, The Bluecoat, Upper Northgate Street, Chester, CH1 4EE

email: [office@thechesterbluecoatcharity.co.uk](mailto:office@thechesterbluecoatcharity.co.uk)

01244 345 787

Any information submitted will be held securely and in accordance with the Charity’s data protection policy.