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**PRESCOT TOWN COUNCIL**

**COMMUNITY FUND APPLICATION FORM**

Small Grant Funding of up to £500 for local community projects

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| **SECTION 1 – Your Organisation** |
| **Organisation Name and Address:** |  |
| **Contact / responsible person:** |  |
| **Role in the Organisation:** |  |
| **Telephone:** |  |
| **Email:** |  |
| **What year was your group established?** |  |
| **Do you have a constitution?** | **Yes** [ ]   | No [ ]  |
| **Are you a registered Charity?** | Yes [ ]  Charity Number: | **No** [ ]  |
| **What are the main aims and activities of your Group?** |  |
| **Which area of Prescot are you based in?** |  |
| **Bank Details:** | Sort Code: Account Number: Account Name:  |

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| **SECTION 2 – Your Project** |
| **Project Name:** |  |
| **When will this take place?** |  |
| **Please give details and costs of the activities and / or equipment that you are applying for:****You will be required to evidence each item of expenditure if successful** |  |
| **How will this project make a difference in your community?** |  |
| **Who will mainly benefit from your project? (please tick the boxes that apply to your project)** | **Groups** |  |
| Young PeopleOlder PeopleGeneral CommunityResident AssociationSports or ArtsMinority groups (e.g. LGBT, Disabled, BME) | [ ] [ ] [ ] [ ] [ ] [ ]  |
| **How many people will benefit from your project?** |  |
| **How much funding are you asking for? (Max £500 please include an itemised list of costs to support your request)** |  |
| **Have you secured funding from anyone else?** |  |
| **How will your project recognise the support of the Town Council** |  |
| **Who will be running the activity?**  | [ ]  Unpaid Volunteers  | How many  |
| [ ]  Paid Volunteers | How many |
| [ ]  Paid Staff | How many  |

**Declaration:**

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| **I declare that to the best of my knowledge and belief the information supplied on this application form is correct. This application is in compliance with the guidance notes and I confirm that I have the authority to sign on behalf of the organisation making this application.** | Signed:  |
| Position:  |
| Date:  |

**All successful applications will be required to submit proof of expenditure no later than 3 months after the project completion date. Failure to so will result in clawback of funding. You agree to this term by submitting the application.**

**By submitting this form, you agree that we will process your data in line with our privacy notice, which can be accessed via our website www.prescot-tc.gov.uk**.

**You can return your form:**

|  |  |
| --- | --- |
| **By Post:** | Town ClerkPrescot Town CouncilPrescot Town Hall1 Warrington Road Prescot L34 5QX |
| **By Email:** | enquiries@prescot-tc.gov.uk |

**Don’t forget!**

1. To read the guidance notes which will help you to include the information we need.
2. To make sure that your group and your project meet the criteria.
3. To attach a copy of your constitution and a recent bank account statement – you can send these in separately if you apply online.
4. If the project involves children, young people or vulnerable adults, please enclose a copy of your Child / Vulnerable Adults Protection Policy.