

Earley Town Council Application Form - Grants for Community Groups & Organisations

Before completing this application form, please ensure you read and understand the Town Council's Grants Policy. Details of the Policy can be found at www.earley-tc.gov.uk

PART 1 – Organisation Details					
Name of Applicant:					
Your Position:					
Name of Organisation:					
Address:					
Postcode:					
Telephone No/s:	Office:				
	Mobile:				
Email Address:					
Registered Charity No:					
Is the organisation open only to Earley resident? YES No (Delete as applicable) Number of Earley residents served by your organisation:					
PART 2 – Grant Details					
_					
Amount of Grant request (£)					
Details of why the grant i	s required:				

Details of how the grant will be used to benefit the residents of Earley:					
A	T				
Age groups of those who will benefit:					
	<u> </u>	no sussess of the grant will	ho associade		
in view of the purpose of	i the grant, please detail now the	he success of the grant will	be assessed:		
Have you applied for gra	ants from any other source?	YES NO (Delete	e as applicable)		
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If yes, please provide all	details of the Organisation/s, the	ne amounts received and t	he dates.		
, , , , ,	G , , ,				
What other fundraising	activities has your group/organi	isation undertaken in the p	ast 12 months?		
	PART 3 – Finance				
This application form	must be submitted with a co		most recent set		
	of account				
From the most recent se	et of accounts, please provide th	ne following summary:-			
			•		
Annual Expenditure	£	Annual Surplus/Deficit	£		
A	6	Tatal Danaman	£		
Annual Income	£	Total Reserves	t		
Dlagge add any further	information in support of your	annlication which you wa	uld like the Council		
Please add any further information in support of your application which you would like the Council to consider. (Continue on a separate sheet if required)					
to consider. (Continue o	ii a separate sheet ii required)				

Payment may be made by cheque or electronically. If you require electronic payment, please include the appropriate bank details below:

Name of Account:	Sort Code:	Account Number:				
I certify that the information I have given is true and correct to the best of my knowledge.						
Signed:	Print Name:					
Date:						

Please return your completed form to:- deputy@earley-tc.gov.uk
or by post to

Grant Applications, Earley Town Council, Council Offices, Radstock House,
Radstock Lane, Earley, RG6 5UL

FOR OFFICE USE ONLY

Date Application Received		
Meeting at which application		
considered		
Grant Approved	YES	NO
Reason for Refusal		
(if applicable)		
Grant Amount		
Date Applicant informed		
Date grant paid (If applicable)		
Payment Method		
Officer Name		
Signed:		