



## GRANT APPLICATION FORM

**Name of organisation:**

**First name:**

**Last name:**

**Position in organisation:**

**Organisation address including postcode:**

**Contact number:**

**Email:**

**Are you or any members of your organisation related to any elected member or employee of the council? If so, please give details:**

**Purpose/aims of organisation:**

**Size of organisation/number of members:**

**Detail the organisation's activities over the previous year:**

**Detail the organisation's plans for the forthcoming year:**

**Purpose for which the grant funding is required. Please include details of who in the parish will benefit from the project or scheme requiring funding:**

**Total cost of the project or scheme requiring funding:**

Please provide details of the breakdown of costs

**Type of grant being applied for (tick):**

Revenue	<input type="checkbox"/>	Capital	<input type="checkbox"/>
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**Amount of grant applied for: £**

**If this grant will be providing part-funding for the project or scheme detailed, explain how the rest will be funded:**

**Detail any previous financial assistance from the council, including the date, grant purpose and the amount received:**

**Please provide any additional information you may consider relevant or helpful to the council when considering this application:**

**Does your service/project involve work with children, young people under the age of 18 or vulnerable adults?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Please tick as appropriate

If Yes, as a minimum we expect you to:

- Have safeguarding policies in place that are appropriate to your organisation's work and the project you are asking us to fund
- Review your safeguarding policies at least annually
- Complete a rigorous recruitment and selection process for staff and volunteers who work with children, young people or vulnerable adults, including checking criminal records and taking up references
- Check criminal records at least every three years
- Follow statutory or best practice guidance on appropriate ratios of staff or volunteers to children, young people or vulnerable adults
- Provide child protection and health and safety training or guidance for staff and volunteers
- Carry out a risk assessment, if appropriate
- Secure extra insurance cover, if appropriate

**I confirm that my organisation meets these requirements:**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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### **Consent**

Your privacy is important to us and we would like to communicate with you about the council and its activities. To do so we need your consent. You can find out more about how we use your data from our Privacy Policy which is available from our website [www.saxilbyparishcouncil.gov.uk](http://www.saxilbyparishcouncil.gov.uk).

You can withdraw or change your consent at any time by contacting the Council Office.

- We may contact you to keep you informed about what is going on in the Council's area or other local authority areas including news, events, meetings, clubs, groups and activities. These communications may also sometimes appear on our website, or in printed or electronic form (including social media).
- We may contact you about groups and activities you may be interested in participating in.
- We may use your name and photos in our newsletters, bulletins or on our website, or our social media accounts (for example our Facebook page or Twitter account).

I agree that the Council may process my personal information for providing information and to correspond with me. Please fill in your details below and confirm your consent.

### **Civility and Respect**

The Council has signed up to the national Civility and Respect Pledge<sup>1</sup>, whereby it treats everyone with courtesy and respect and asks for the same in return. Those that apply for grants are expected to agree to abide by the pledge.

<sup>1</sup> <https://saxilby-ingleby.parish.lincolnshire.gov.uk/council-business/civility-respect>

Name on Bank Account: .....  
Bank e.g. HSBC/Natwest etc:.....  
Sort Code: .....  
Account Number: .....

**Checklist (tick to confirm included and agree to)**

- Completed signed application form
- Copy of most recent accounts
- Copy of organisation's Bank Statement where grant would be paid if successful
- Copy of constitution/rules of the organisation
- The organisation will provide the council with copies of receipts for the purchase(s) within one month of expenditure, if successful
- The organisation will provide the council with a short written report demonstrate how the funds are being spent within six months of expenditure, if successful
- Agrees to abide by the spirit of the civility and respect code

**Declaration and Consent:**

I declare that to the best of my knowledge and belief, all particulars and information provided in this document are correct and complete. I understand that any false declaration or misleading information or any significant omission may result in the rejection of the application or repayment of any grant aid subsequently provided.

I give my consent for the council to communicate with me.

**Name:**.....

**Position:**.....

**Signed** ..... **Date** .....

**This signed and scanned form and documents should be returned to the clerk at [clerk@saxilbyparishcouncil.gov.uk](mailto:clerk@saxilbyparishcouncil.gov.uk)**

**Remember, your application must be accompanied by a copy of your most recent published financial accounts plus any other documentation as requested in the form.**