Brockworth Community Centre
Court Road
Brockworth
Gloucestershire
GL3 4ET
Telephone 01452 863123
Email: clerk@brockworth-pc.gov.uk

Please refer to the guidance notes and criteria before submitting your application. If you need any assistance please contact us.

Please indicate what type of funding you are seeking

Revenue Grant, *payable in the year following application, for long term projects* ☐

Small Grant *payable in the same year as the application, for individual projects* ☐

Urgent request for funding - *initially considered by Council upon receipt* ☐

Name of Group / Organisation:

Main Contact Name:

Contact address:

Daytime phone number of contact:

Contact e-mail address:

Are you a newly formed group? (*less than 1 year*) **Yes** ☐ **No** ☐

How long has your group been operating?

Do you have a voluntary management committee / steering group? **Yes** ☐ **No** ☐

Does your group have a formal constitution? **Yes** ☐ **No** ☐

Does your group have an equal opportunities policy / statement? **Yes** ☐ **No** ☐

Does your group have an annual record of accounts? **Yes** ☐ **No** ☐

Please attach a copy of your most recent accounts or latest bank statement to your application

Have you applied for a grant from Brockworth Parish Council before? Yes ☐ **No** ☐

Please describe your group's main activities:

How much are you applying for?

When would you require payment?

What is the grant for?

Who in Brockworth will benefit from it? **Number of people:**

How will Brockworth benefit from it?

Have any other bodies been approached for grant funding in relation to this application/project? **Yes** ☐ **No** ☐

If yes please provide details:

Please provide a full breakdown of the project costs and how they will be funded:

Item	Cost	Funded from
Total project cost:		

Please continue on a separate sheet if necessary

What will you do if you get less funding than you asked for? Will all or part of the project still go ahead? Please tell us what could be achieved if you only receive part funding.

If successful, your grant will be paid by either cheque or BACS, please provide the account name (cheque payee), sort code and account number for the bank account you would like payment transferred to:

Account Name	
Sort Code	
Account Number	

Please read the following important terms and conditions carefully. By signing this form, you are confirming that:

- You are an official representative of your group and are authorised to apply for funding on their behalf.
- Your details can be held by Brockworth Parish Council in accordance with the Data Protection Act to administer the grants process.
- The information provided in this application is a fair and accurate description of your group and the project for which you are seeking funding. Misleading or inaccurate information may result in your application being rejected. Late application or failure to complete any section of the application form may result in your application being delayed or rejected.
- Information about your group and your project may be made available as part of Brockworth Parish Councils decision making system. Personal contact details and bank details will not be made public.
- You have given due regard to health and safety considerations and have controls in place to eliminate or reduce risk exposure.
- You will provide Brockworth Parish Council with any information they request to enable them to assess your application. This may include (but is not restricted to) a copy of your constitution, accounts or bank statements, equal opportunities policy, insurance and relevant health & safety policies.
- You will provide Brockworth Parish Council with any evidence or monitoring information they request to ensure that any grant awarded has been spent in accordance with this application and any other terms and conditions.
- Grant funding may be subject to additional terms and conditions, which will be made available to you if your application is successful.
- You confirm that the information given in this application is a fair and accurate description of your group and your proposed project.
- You are authorised to apply for funding on behalf of the group and agree to abide by the terms and conditions of the grants process.

I agree: (*Please tick the box)* ☐

Signature:

Date:

Position in Organisation:

Please send your completed application form, a copy of your latest accounts or bank statement and any supporting information to:

Brockworth Parish Council, Community Centre, Court Road, Brockworth, Gloucestershire, GL3 4ET
Or e-mail: clerk@brockworth-pc.gov.uk

Further information about Brockworth Parish Council and its grant making policy is available from: www.Brockworth-pc.gov.uk