

# EARL SHILTON TOWN COUNCIL

## INDIVIDUAL GRANT APPLICATION FORM

Name of Individual:

Address:

Email:

Tel:

How long have you lived in Earl Shilton:

**Purpose of Grant** (please ensure that the project is compatible with our criteria – please attach supporting documents for your application)

**Aims & objectives of your intended project** (please provide a brief outline)

**How will the grant make a difference in developing the project**

**Amount requested** (maximum of £300.00 per annum)

Purpose of the grant (please explain what you intend to use the grant for and what benefit it will bring your organisation, but it must be 'inclusive whole town benefit' for all the community. Costings per item/service to be bought to the nearest £50 are to be listed. Please use a separate sheet if required.

<b>Break Down of Project Costs:</b>
<b>Have you applied for funding from Earl Shilton Town Council previously:</b>
<b>If the grant is successful, please state if payment is to be made by cheque or BACS.</b> Cheque – Payable to..... BACS (details can be provided to the office directly)
<b>I Undertake to:</b> a) Provide Earl Shilton TC with three months bank statements b) Provide Earl Shilton TC with a written report on the project/trip within 4 weeks of the project finish date. c) Repay all monies received from Earl Shilton TC should the project/trip not proceed for any reason.
<b>I confirm that the information provided in this application is accurate</b> Signed ..... Date ..... Name in block capitals ..... Position in Organisation .....
<b>WHEN THIS FORM IS COMPLETED, PLEASE DELIVER TO:</b>  Town Clerk, Earl Shilton Town Council, The Public Library, Wood Street, Earl Shilton, Leicestershire, LE9 7NE