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**Application for funding**

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| --- | --- | --- |
| Name of Charity |  | |
| Charity Registration Number |  | |
| Are you part of a larger or national charity? |  | |
| Main geographical area of activity |  | |
| Outline of your charity |  | |
| Contact name |  | |
| Position in charity |  | |
| Address |  | |
| Telephone number |  | |
| E-mail address |  | |
| Website address |  | |
| PROJECT TITLE AND SUMMARY – please give as much information as possible to include information on (a) the purpose of the project, (b) who benefits and (c) expected impact and outcomes | | |
|  | | |
| TRUSTEES – please list the Trustees of the charity | | |
|  | | |
| STAFF – please list the current full-time and key part-time staff | | |
|  | | |
| Total cost of the project?  Please break down the key components | |  |
| Funding for the project?  What funding have you received for this project to date? | |  |
| What is the total amount you would like from us? | |  |
| Total income and expenditure forecast  for the current year and actual for the previous year | |  |
| Surplus (deficit) forecast for the current year and actual for the previous year | |  |
| Net current assets for the current year and actual for the previous year | |  |
| Current free reserves | |  |
| Please explain fully your charity’s reserves policy | |  |
| What are the main financial risks your charity is facing and how are you addressing these? | |  |
| Please list your charity’s main donors and what proportion of your funding do they account for? | |  |

Please enclose a copy of your current Accounts and Annual Report with this application.

This application must be signed by the Chair, Chief Executive or person of similar authority.

I hereby certify that all the information in this form is accurate to the best of my knowledge.

NAME:

SIGNATURE:

POSITION IN CHARITY:

DATE: