

APPLICATION FOR FINANCIAL ASSISTANCE TO EDLINGTON TOWN COUNCIL

*Please complete this application having regard to our Grant Application policy (terms and conditions)

1. Name of Organisation:

2. Name and Address of Correspondent (and office held):

3. What are the objectives of your organisation?:

4. Is membership/support open to any resident of Edlington Town Council, regardless of sex, age, ethnic origin, religion, disability or sexual orientation?:

5. Amount of grant applied for £ :

6. Purpose for which money will be used. Please explain clearly and simply the reason for your request:

7. Have you applied for grant aid to any other organisation (including local authorities)? If so, to whom (please give details of the decision on your application):

8. Explain how you will ensure equal opportunity for all in relation the project/purpose for which you are seeking funding

9. Does your project involve work with children, young people under the age of 18, or vulnerable adults? If yes, as a minimum we expect you to:

Have safeguarding policies in place that are appropriate to your organisations work and the project you are asking us to fund.

Policies and procedures for working with young / vulnerable people such as a Child Protection Policy (if working with children under 19 years old) or a Vulnerable People Policy

And provide evidence in support of this application

10. Is there anything else you wish the Town Council to take into account when considering this application?

I agree to the Principles of Grant Aid as set out by Edlington Town Council

Signed

Dated

Please return this form to Simon Oldham, Clerk - Edlington Town Council c/o The Grainger Centre, Stubbins Hill, Edlington, Doncaster, DN12 1JN.

edlingtontc@gmail.com