

COMMUNITY INVESTMENT FUND SEVERN APPLICATION FORM

Swindon • Royal Wootton Bassett • Malmesbury • Cricklade • Calne • Purton • Gloucester and Villages



Section 1 – about you and your group

Q1 What is the name of your group?

Q2 Address Post Code

Q3 Contact names

Q4 Contact Number/s

Q5 Email Address

Q6 What is your role / responsibility within the group?

Q7 What does your group do?

Q8 How is your group managed/run?

Q9 Does your group have a constitution?

Yes (please enclose a copy) No

Q13 Target area/s

- Calne Cricklade Malmesbury Purton
- Royal Wootton Bassett Swindon Gloucester
- Other (please state)

Q14a) How will your project benefit the Community?

Q14 b) How many people do you think your project will benefit? _____

Section 3 – Funding

Q15 How is your group/organisation funded?

Q16 What is the total cost of your event / project? £ _____

Please give a breakdown of the costs

Description	£

Q17 How much money are you applying to the GreenSquare Community Fund for?

£ _____

Q18 Which other organisations are supporting your project, financially or otherwise?

Q19 What will happen if you do not receive this grant?

Section 4 – statement and checklist

- I agree to be featured in any GreenSquare publications
- I give permission for my application and supporting papers to be photocopied and sent to the members of the Greensquare Community Fund Group to be considered for a grant
- I agree to complete an evaluation form

Statement

I confirm that the information given in this application is a true statement and that I am authorised to make this application on behalf of the group

Signed _____ Date _____

On behalf of (person/group/organisation) _____

Checklist

Have you

- Taken a copy of the application form
- Attached any other information / publicity to support your application
- Included a copy of your constitution (if applicable)
- Attached a copy of your recent accounts (if applicable). Please provide details of the bank account where grant payment would be made.

Bank Account Name:	_____
Bank Name:	_____
Sort Code:	_____ Account No. _____
Signatory 1	_____ Signatory 2 _____

***As funds are limited not all applications will be successful and the decision will be final.
Completing this application form is not a guarantee that you will receive funding.
Please do not allocate money to a project until you have received confirmation that it has been approved.***