General Grant Application Form



Thank you for looking for our support. Please fill in the form below to start your application. The more information you can provide, the easier it will be to assess your application.

If you have any questions or need help completing this form, please call us on 01462 476057 or email grants@letchworth.com

Step 1: Tell us a little about your group's details					
Name of your group					
Address of your group					
Postcode					
Website of your group					
The name of the main contact of your group					
Position held in your organisation (if applicable)					
Main group contact address					
□ Tick if main correspondence address for application.					
Postcode					
Main group contact daytime telephone number					
Main group contact mobile telephone number					
Main group contact email address					
Step 2: Tell us more about your organisation and you					
How would you best describe your group?					
Charity Registered Company Club Community Group					
When was your group formed?					
When was your group formed?					
Briefly describe why your group was set-up and how you meet this purpose in fewer than 100 words.					
How many paid members of staff does your group have?					
How many volunteers does your group have?					
For groups with memberships:					
 How many members do you have in your group? 					
 How many members of your group live in Letchworth? 					
How much does it cost to be a member of your group?					

Step 3: Tell us about your proposal

Which one of our Charitable Commitments best describes the aims of your proposal?

- **D** To preserve buildings and other environmental features within Letchworth Garden City.
- **D** To provide recreation facilities and activities.
- **D** To advance education and learning.
- **D** To provide facilities and services to support a healthier lifestyle.
- **D** To support a charity with an office or branch in Letchworth Garden City.
- **D** To support other charitable purposes for the benefit of the local community.

What is the title of your proposal?

Please describe your proposal including:

- The need you have and how your group has identified this need.
- How your proposal will meet the need or needs you have identified in your proposal.
- An explanation of the skills you have within your group or will be bringing in to your group to successfully deliver your proposal.

Who will benefit most from your proposal and how will your group involve themselves in your proposal?

Please explain the difference your proposal will make to those that will benefit the most?

How many people will directly benefit from your proposal and how many live in Letchworth Garden City?

If your proposal is successful, what will be the wider benefits for either your group, Letchworth Garden

City or the wider communi	ty?							
Where will your proposal t	ake place (if ap	oplicable)?						
In a maximum of 100 word proposal.	ls, please expla	ain how you will eit	her assess or measure	the success of your				
Step 4: Financing you	ur proposal							
What is the estimated cos		sal? £						
How much funding are you	u looking for fro	om us? £						
What is the cost breakdown of your proposal? (give an itemised breakdown – e.g. staffing @ £25 per hour = £100)			How much have you raised towards it so far and from					
Item	Cost £	Source	Amount	Where it will be spent				
Please attach copies of su Large items, building work			, , ,					
Please list any other fundi include this here)	ng you have ap	oplied for (if the fun	ding is for a specific pa	rt of your proposal				
Funder	Amount £		When will you	When will you hear back?				
If your proposal extends b indicate how much will be	•		1 October to 30 Septer	nber), please				
If your application is succe comes to an end or is it a			tinue with the proposal	after this funding				
For larger groups, please please include a copy of a				r smaller groups				

Step 5: Your Bank Details											
To help process the payment of grants please can you fill in the following:											
Name of Account											
Bank Name	:			Branch:							
Sort Code:				Account Number:							
If this is a Building Society account please tick here :											
Step 6: C	hecking	your applic	ation Ha	ave you							
Before signing and sending your application to us, please check you have:											
Read t	hrough you	ir application a	and complete	ed all the sections	s whicl	h app	ly to	your	group	•	
Include	ed copies o	f supplier quot	tes for mater	ials and / or serv	ices in	your	prop	osal.			
	ed a copy o	f your most re	cent monthly	y accounts and /	or a ba	ank o	r buil	ding s	society	y	
statement.											
				ort your applicati							
		f your Safe Gi	uarding Polic	cy if your proposa	al invol	ves w	vorkir	ng wit	h chilo	dren o	r
vulnerable a	adults.										
Step 7: D	eclaratio	n									
To complete	e the applic	cation form, th	is declaratio	n needs to be sig	ned by	y the	appli	cant a	and a	memb	ber
of your Management Committee.											
I confirm that, to the best of my knowledge and belief, all the information in this application form and											
any supporting documentation is true and correct. I understand that you may ask for additional											
information at any stage of the application process.											
For you to complete											
Signed				Date							
Print name				Position							
For a member of your Management Committee to complete											
Signed				Date							
Print name				Position in group or profession							
Step 8: Send us your application											
We will acknowledge receipt of your application as soon as we receive it.											
For details of our Deadline and Decision Dates, please see our website.											

Send your completed form to grants@letchworth.com or print and post:

Grants Team Freepost RSSB-UHEX-JXAK Letchworth Garden City Heritage Foundation Foundation House Icknield Way Letchworth Garden City Hertfordshire, SG6 1GD

