



Market Harbourough & The Bowdens Charity

**A Charitable Incorporated Organisation
Registered Charity Number: 1157787**

GRANTS SCHEME APPLICATION FORM

PLEASE READ THE CHARITY'S GRANT POLICY CAREFULLY BEFORE COMPLETING THE APPLICATION FORM AND PROVIDE AS MUCH RELEVANT INFORMATION AS POSSIBLE ABOUT THE PROJECT FOR WHICH YOU ARE SEEKING FUNDING. IF THERE IS INSUFFICIENT SPACE IN ANY OF THE AREAS BELOW PLEASE CONTINUE ON A SEPARATE SHEET AND/OR INCLUDE ANY SUPPORTING DOCUMENTS. IF YOU HAVE ANY QUERIES ON THE COMPLETION OF THE FORM PLEASE CONTACT THE STEWARD TO THE CHARITY ON 01858 419128

SECTION A

DETAILS OF ORGANISATION

FULL LEGAL NAME OF ORGANISATION (AND TITLE BY WHICH YOUR ORGANISATION IS COMMONLY KNOWN, IF APPLICABLE)	
ADDRESS FOR CORRESPONDENCE	
TELEPHONE NUMBER	
FAX NUMBER	
EMAIL ADDRESS	
CONTACT PERSON AND POSITION IN ORGANISATION	
CHARITY REGISTRATION NUMBER (IF APPLICABLE)	
NAME OF ORGANISATION TO WHICH GRANT WOULD BE PAID	
AIMS AND PURPOSE OF ORGANISATION	
CONSTITUTION	PLEASE ATTACH A COPY OF YOUR ORGANISATION'S WRITTEN CONSTITUTION AND/OR RULES

SECTION B

DETAILS OF GRANT APPLICATION

GIVE FULL DETAILS OF THE ASPECT OF THE WORK FOR WHICH YOU ARE SEEKING A GRANT AND STATE WHAT A GRANT FROM THE CHARITY WOULD ENABLE YOU TO ACHIEVE. PLEASE INCLUDE POINTS SUCH AS THE NUMBER OF PAID PEOPLE/VOLUNTEERS INVOLVED, HOW MANY PEOPLE WILL BENEFIT, THE PLANNED STARTING DATE OF THE PROJECT AND IF IT IS AN ON-GOING PROJECT HOW IT IS TO BE STAFFED AND FINANCED IN THE FUTURE.

PLEASE NOTE THAT THE CHARITY IS NOT NORMALLY ABLE TO SUPPORT PROJECTS WHERE EITHER WORKS HAVE COMMENCED OR HAVE BEEN INSTRUCTED TO COMMENCE PRIOR TO THE GRANT APPLICATION HAVING BEEN DETERMINED

SECTION C**FINANCIAL DETAILS**

TOTAL COST OF PROJECT INCLUDING BREAK-DOWN OF PRINCIPAL COST ELEMENTS AND VAT	
ARE YOU VAT REGISTERED? IF SO QUOTE REGISTRATION NO.	YES <input type="checkbox"/> NO <input type="checkbox"/> VAT REGISTRATION NO _____
ARE YOU ABLE TO RECLAIM THE VAT ELEMENT OF THE PROJECT COST?	YES <input type="checkbox"/> NO <input type="checkbox"/>
AMOUNT OF GRANT FOR WHICH YOU ARE APPLYING	
SOURCES AND AMOUNT OF FUNDING RAISED SO FAR	
OTHER POTENTIAL SOURCES OF FUNDING (IE HOW YOU INTEND TO RAISE THE BALANCE OF THE PROJECT COST)	
ACCOUNTS	PLEASE ENSURE THAT YOU HAVE ENCLOSED A COPY OF YOUR MOST RECENT ADOPTED ACCOUNTS AND ANNUAL REPORT

SECTION D

PLEASE GIVE FULL DETAILS OF ANY PREVIOUS APPLICATIONS MADE TO THE CHARITY BY YOUR ORGANISATION,
TOGETHER WITH DATES AND AMOUNTS OF PREVIOUS GRANTS PAID.

NAME (BLOCK CAPITALS) _____

SIGNED _____ **DATE** _____

ALL APPLICATIONS SHOULD BE ADDRESSED TO

Miss J.A. Edwards (Charity Secretary)
The Principal Office, Market Harborough and The Bowdens Charity
10 Fairfield Road, Market Harborough, Leicestershire, LE16 9QQ
Telephone: 01858 419128
Email: jedwards@mhbcharity.co.uk