



SAFFRON WALDEN TOWN COUNCIL

Grant Application Form

Version	Date Adopted Policy	Minute Reference	Review Date
1	October 2016	A & S 116-16	October 2018
2	June 2018	F & E 380-18	October 2020
3	July 2019	F & E 038-19	October 2020
4	May 2021	F & E 053-21	Oct/Nov 2021
5	July 2022	F & E 108-22	October 2023



GRANT AID APPLICATION FORM FOR LOCAL PROJECTS

	Section 1 – About the	e Applicant
1	Name of Applicant/Organisation	
2	Applicant contact name, address, email and telephone*	
	*Please note that this information will be published in the public domain unless we receive express instructions to the contrary.	
3	Aims & Objectives of Applicant / Organisation Tell us a little about your organisation – what you do and why	
4	What is the Nature of your Organisation? ie are you a registered Charity, Social Enterprise or Community Interest Company? If yes, please provide registration details:	
5	Does Your Organisation Have:	
	Accounts: Equal opportunities policy: Safeguarding or child protection policy*	why these details are missing. wild protection policy, please advise



6	is your application for a reduced hire fee for any Town Council premises?
	Yes No
	If yes, what is the date of your event and have you booked the facility with the Town Council?
	If No, please proceed to question 7.
7	Have you previously applied to SWTC for grant funding? Yes / No
	If Yes, please give details of when and if the application was successful, the grant received and the purpose. Reminder that funding is restricted to one application per organisation per financial year (1 st April – 31 st March)
	Section 2 – The Project
8	Project name:
	Project aim:
	Start Date:
	End Date:



9	Please give details of the project activities and timeline
10	What particular need do you consider the project will meet?
11	How have you identified the need for this project? Please include your experience in this field and research and scoping that has been carried out with the intended target group
12	Please give a reasonably accurate figure for the number of people, within Saffron Walden Town Council's area (the parish of Saffron Walden and Little Walden, see map attached for the area served by SWTC), the project will serve. If possible, please provide evidence of this within the Data Protection Act



13	Please give a brief outline of:		
	 How this project benefits the residents of Saffron Walden Town Council's area The change you wish to see as a result of your project or activity for the residents of the Saffron Walden parish How your project will be measured 		
14	Where will any equipment be kept and how will it be insured?		
15	Address where main activities will take place		
16	How will you ensure that the project will be all-inclusive?		



	Section 3 – Funding Requirement
17	What is the total cost of the project? Please attach a budget breakdown for this cost
18	Amount requested from Saffron Walden Town Council and for what purposes (please be as specific as possible) (please note grants are ordinarily restricted to £500 per application)
19	Have you applied for funding from other sources for this project?
	Yes No
	If yes, please indicate how much and who from
20	Have you applied for funding from other sources for any other project which may relate to this funding request? If so, please give details of when, and if the application was successful, please give details of the grant received.
21	How will you ensure that SWTC support of this project is promoted?



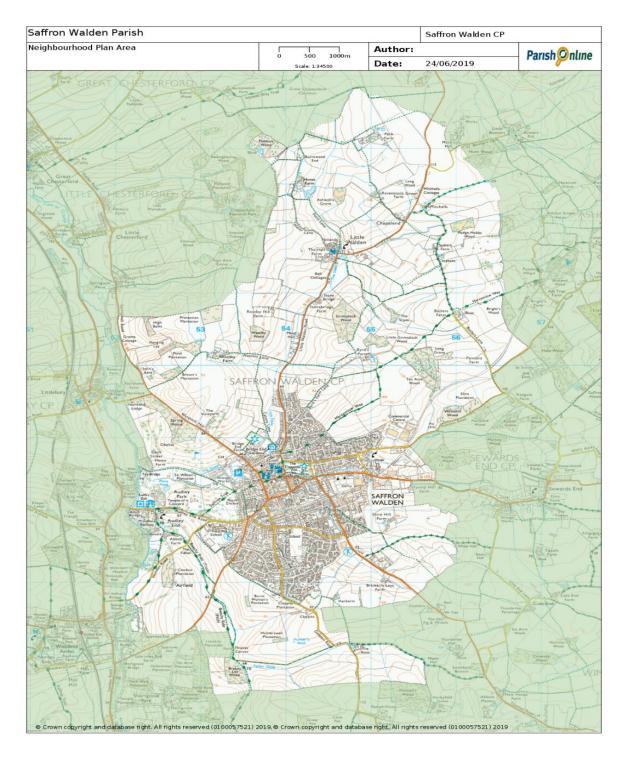
	Section 4 – Contact Details
22	Contact details for this application (this must be someone who has full knowledge of the application and can answer questions about it). Please note that these details will be made known in a public forum unless you specifically advise that details should be with-held
	Name
	Tel No
	Email address
	Date of application
23	Bank/Building Society Details
	Grants will ordinarily be made by cheque payment. Name to appear on cheque payment:
	If this is not the name of the group applying, please provide an explanation for variance.
24	Declaration – must be signed by at least 2 persons
	We confirm that the information given in this application is correct. We are authorised to make this application on behalf of:
	Name of Organisation:
	Signed: (1st person)
	Name:
	Position in Organisation:



Signed: (2 nd person)
Name:
Position in Organisation:

Map showing the parish of Saffron Walden. The Town Council serves all the area shown in white







For Internal Office use only: Information to Committee

Details of any previous grants awarded to this Organisation (Provide details for grants in past five years)

(Frovide details for grants in past rive years)		
Additional Information:		
Recommended Source of Fundin (As recommended by SWTC Officer)	g:	
Youth Partnership (to Assets & Services Committee)	Current balance in budget	
Small Grants Scheme (to Finance & Establishment Committee)	Current balance in budget	
Free of Charge Hire (to Finance & Establishment Committee)	Current balance in budget	
To be completed for questions 6	& 7:	
Commercial hire cost:		
Resourcing cost to Town Council (any additional cost):		
Potential Net loss / profit to SWTC:		