



FFOS-Y-FRAN SMALL GRANT APPLICATION FORM

PLEASE PRINT

Name of Group / Organisation.....

Location of Project.....

Contact Person.....Position in the Group.....

Full Correspondence Address.....

.....Postcode.....

Phone: Home Mobile.....

E Mail (if applicable).....

Type of Group (Please Tick)

- | | |
|--|---|
| <input type="radio"/> Community Group | <input type="radio"/> Voluntary Group |
| <input type="radio"/> Residents Association | <input type="radio"/> School Group |
| <input type="radio"/> Sports Club / Group | <input type="radio"/> Youth Group |
| <input type="radio"/> Religious Group | <input type="radio"/> Senior Citizens Group |
| <input type="radio"/> Other (Please Specify) | |

Does your organisation have a safeguarding policy? Yes/No

Brief description of the group.....

.....

What does your group want to do with this award?.....

.....

.....

How does your use of the award benefit the community (*i.e. the people*)?.....

.....

How does your use of the award benefit the local area (*i.e. the environment*)?.....

.....

Number of people and the area that will directly benefit from the award:.....

.....

Has your group raised or will you contribute any money of your own towards the project. If yes how much?

.....

Who will take long-term responsibility / maintenance for the project after the award?

.....

Please give details what you will need and how much it costs (If you have had quotes please supply with this application form). *(Continue on separate sheet if necessary)*

ITEM	COST £
Total applied for Inc VAT	

All recipients of an award are required to provide receipts, where possible, confirming that the expenditure was used in accordance with the approved application details. Where it is not possible to provide receipts then written confirmation/bank statements should be forwarded to the Community Regeneration Department at Merthyr Tydfil Council Borough Council by the recipient organisation stating that the monies have been used in accordance with the approved application. Failure to provide the required information will result in no further Ffos-y-fran funds being awarded to your organisation and a requirement to repay the funding awarded.

All applications supported from the Ffos-y-fran Small Grant Scheme must support local community projects with an educational, environmental or leisure emphasis.

In order that both the Ffos-y-fran "Small Grant Scheme" and the Biffa Community Fund is distributed fairly and equitably any organisation or community group will only be allowed to make one successful application per 12 month period from either the Ffos-y-fran Small Grant Scheme or Biffa Community Fund.

I / We confirm that the information provided is accurate to the best of my / our knowledge and that there will be no discrimination on account of, but not limited to, disability, race, colour, religion, nationality, ethnic origin, age, sex, sexual orientation or marital status.

SIGNED: (POSITION IN GROUP).....

PRINT NAME:DATE.....

Please hand forms back to a Councillor for the area your Group / Organisation operates in.

Electoral Division Councillors signatures:

SIGNED:

PRINT NAME:

SIGNED:

PRINT NAME:

SIGNED:

PRINT NAME:

SIGNED:

PRINT NAME: