**INCHMARLO, BRATHENS & GLASSEL COMMUNITY FUND - Short Form Application (Less than £1000)**

Before completing this form, please read the guidelines which are available from www.ibgcc.org or by emailing treasurer@ibgcc.org

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| **Project Title** |  |
| **Amount Applied for** |  |
| **IBGCC application reference number****(*leave blank*, *number entered by IBGCC*)** |  |

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| **SECTION 1: YOUR ORGANISATION** |
| 1 | **Name of your organisation** |  |
| 2 | **Address**:Please provide the address for correspondence |  |
|  3 | **Contact details:** Name Contact must be someone who can talk about the application and funding needs in detail |  |
| 4 | **Position in organisation** |  |
| 5 | **Address (if different from that above)** |  |
| 6 | **Tel (day)** |  |
| 7 | **Tel (evening)** |  |
| 8 | **E-mail** |  |
| 9 | **Geographic area covered by organisation** The application must fall within our schemes designated areas - see our guidelines |  |
| 10 | **Describe the structure of your organisation** |  |

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| **SECTION 2: YOUR PLAN** |
| 12 | **Does the project have a specific location?** |  |
| 13 | **If Yes, where is it located** |  |
| 14 | **Description of Project (max 400 words)** |  |
| 15 | **How will this project benefit the Inchmarlo, Brathens & Glassel Community? (max 400 words)** |  |

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| 16 | **Which of the following criteria do you believe your project meets?** Please ensure you explain why in section 14 or 15 above. | Please tick all that apply ✔ |
| Helps to improve and sustain wildlife and the environment |  |
| Helps to unite the community |  |
| Promotes health, sports or well being |  |
| Benefits vulnerable, disadvantaged or disabled people |  |
| Benefits children and young people |  |
| Benefits older people |  |
| Provides improved access to countryside and/or local amenities |  |
| Restores derelict land for community benefit |  |
| Preserves local heritage |  |
| Improves transport links for the community |  |
| Improves communication links for the community (newsletters etc.) |  |
| Supports educational development |  |
| Community building development |  |
| Voluntary self-help group |  |
| Supports energy efficiency |  |
| Other (please specify) |  |

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| **SECTION 3: FUNDING** (Remember to include copies of Quotes) |
| 17 | What is the total cost of the project including VAT? | £ |
| 18 | What funding are you seeking from the Inchmarlo, Brathens & Glassel Community Fund? | £ |
| 19 | Do you already have funds available towards the project? How much? | £ |
| 20 | Will there be any longer term funding requirements for this project in order to sustain it into the future? |  |
| 21 | If so, is this source of funding in place? |  |
| 22 | Has your organisation successfully received funding from the Inchmarlo, Brathens & Glassel Community Fund previously? When, and how much did you receive? |  |
| 23 | Please provide bank details for payment of a grant should it be awarded.  |  |
| 24 | Please attach any other information deemed relevant to your application  |  |
| 25 | Please provide a breakdown of the main cost elements for your project (or attach itemised list) |
| Item or activity | Cost (£) incl VAT |
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| **Total Project cost**  |  |

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| **DECLARATION** |
| ***We are authorised to submit this application on behalf of the organisation and certify that the information enclosed is correct. By signing this application form, we agree to abide by the terms and conditions included in the grant guidelines and any additional special conditions within the letter of award. We understand that we will be required to monitor expenditure and to provide the Inchmarlo, Brathens & Glassel Community Council reports on the progress (if duration more than a year) and on the completion of the project including receipts. This information will be included in an annual report which will be sent to Mid Hill Wind Ltd for potential use in their company reporting and publicity.*** |
| **Signature 1** |  |
| **Date** |  |
| **Signature 2** |  |
| **Date** |  |

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| **CHECKLIST -** *Please ensure that you have included the following information as it applies to your application. Failure to do so may delay or jeopardize your application. Please use the tick boxes* ✔*or mark “NA” if not applicable.* |
| The completed application form signed by two people |  |
| A copy of your signed constitution or set of rules for your organisation |  |
| A set of organisation accounts signed by your treasurer. For groups less than one year old a recent bank statement and annual budget. Details of your banking arrangements if you don’t have an account |  |
| If your organisation relates to children or vulnerable people, copies of your Child Protection Policy and Vulnerable Persons Policy |  |
| Any other supporting information is attached as an appendix to this application form |  |

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| **Please return the completed form by email to:**  |  **treasurer@ibgcc.org** |