

Faversham Town Council COMMUNITY GRANTS APPLICATION 2024

The Town Council wants to help local Groups who serve the community in Faversham. If you need assistance to complete this form please contact the office using the details on page 6

Project Name	
Grant Amount Requested	£
Organisation Name	
Organisation Address	
Telephone Number	
Email Address	
Contact Name	
Position Held in Organisation	
1. About the project you are	planning
1.1. What do you plan to do v	vith the Community Grant funding you are seeking?

1.2. How have you identified this need?	
1.3. How will you measure the success of your project?	
1.4. What positive legacy will your project leave for future residents of Faversham?	
1.5 If you have received a grant from us previously please provide details of the date and amount and evidence of how the grant was spent	
and amount and other the grant was spont	

2. Project Funding and Costs

2.1. Please advise of any other organisations you have asked to support your project and indicate whether any funding has been committed by these organisations.

Organisation Name	£	Status - Approved / Awaiting Decision or other support (non-financial)
	£	
	£	
	£	
	£	
Total - Other Funding Requested	£	
Total - Community Grant Funding Requested	£	Should be the same figure provided on page 1
Total funding required for your project	£	

2.2. Please provide a breakdown of your project's costs. Please note that this should be a breakdown of your total project costs

Expenditure (eg Equipment, Transport etc)	£
	£
	£
	£
	£
	£
	£
	£
	£
	£
Total Project Costs This should match the Total funding required for your project, above.	£

2.3. If the Town Council makes an offer less than the amount requested, how will the project cover the shortfall?		
2.4 What plans do you have in place	e to ensure that your organisation is not reliant on grant	
funding in the future?	e to ensure that your organisation is not reliant on grant	
3. About your organisation		
3.1. What type of organisation are yo	ou? Please tick the relevant category:	
Registered Charity	Registration Number:	
Voluntary Organisation		
Limited Company	Company Number:	
Community Group		
Other	Please Specify:	

3.2. Briefly describe your organisation. Describe your organisation, how many members/users you have, if you charge subscription fees and the usual activities/services you provide. If you are a new organisation please describe the activities/services you plan to provide.

3.3. Do you have a Constitution or Memorandum of Association a copy with your application.	on? Please state which and include	
•	ubscriptions, donations, sponsorship,	
fundraising, grants etc.		
3.5. Projects working with children, young people or vulnerable adults must have a safeguarding policy. If you don't have a safeguarding policy or relevant DBS checks in place you can still apply for funding but you will be required to put these in place before any grant is awarded.		
Do you have a safeguarding policy?		
Do your Staff/Volunteers have valid DBS checks?		
3.6. Depending on the nature of your project, you may require	e public liability insurance.	
Do you have public liability insurance?		
2.7 Please provide the following details from your most reco	nt annual accounts	
3.7. Please provide the following details from your most rece		
Total Income	£	
Less Total Expenditure	£	
Surplus / Loss Savings (Reserves, Cash, Investments)	£	
	£	

Please attach a copy of your most recent audited accounts with your application. If you are a new organisation please include a projected income and expenditure report for the next 12 months.

3.8. Any Other Infor application.	rmation. Please provide any other information which you consider to be relevant to your
4. Declarations	
4.1 To be complete	d by a capier member of your erganisation
	ed by a senior member of your organisation
belief, all replies are	uthorised to sign this declaration and that to the best of my knowledge and true and accurate.
Name	
Post Held	
Signature	
4.2. To be complete above)	ed by the person completing the application (must be different to
I confirm that I am au belief, all replies are	thorised to sign this declaration and that to the best of my knowledge and true and accurate.
Name	
Post Held	
Signature	
5. Checklist	

Have you answered every question? have all signatures been completed? Have you included a copy of your constitution?

Have you included a copy of you accounts? Have you included any other relevant policies?

Please submit your completed Application Form and Additional Documents to: Louise.bareham@favershamtowncouncil.gov.uk

or post to:
Faversham Town Council
12 Market Place
Faversham
ME13 7AE

Closing date for applications is Friday 26th July 2024
Successful grant applicants will be notified by 15th September 2024