



GRANT AID APPLICATION GUIDELINES

Who can apply?

Although funding is limited, the Community and Grants Committee will aim to distribute funds to those who need it most, whether it is working with disadvantaged groups, health, social inclusion, starting up a new business, a trip or new initiatives and projects.

We are pleased to consider any application that will benefit people living within the Bletchley and Fenny Stratford Town Council area.

What we look for in an application

Does the project benefit residents of the Bletchley and Fenny Stratford Town Council Parish?

What are the lasting benefits of the project?

Is the application realistic?

Have you applied for funding from other sources?

Is the application filled in completely and correctly?

Will the project be well run and effectively managed?

Will the project be all-inclusive?

How to apply

We recommend that your application be planned well in advance. It can be sent to us at any time and you only need to fill out one form. Carefully complete the enclosed application and send it to us, ensuring, if applicable, all the relevant documents are enclosed.

Accounts – If your organisation has accounts please supply photocopies of the last 6 months of your account statements. If you do not have up to date accounts, please

supply us with a 6 month forecast of accounts for your project.

Constitution - Where applicable please supply us with a copy of your organisations constitution.

Charity registration Number - Where applicable please supply us with your organisations charity registration number.

Written Quotations - For all applications requiring equipment purchase we will require 2 quotes. For all applications requiring building work we will require 3 quotes.

WHAT HAPPENS TO YOUR APPLICATION?

The committee will consider bids monthly. The Community & Grants Committee meet on the first Tuesday of every month. Completed application forms must be received in the Town Council offices at least one week prior to the meeting date, i.e. by the last Tuesday of the month.

Applications normally take about 4 - 8 weeks to process and you may receive a phone call from a member of our staff requesting some more information or maybe a visit. Although Grant Aid funding is limited, we do try to support as many projects/organisations which specifically benefit residents of all ages/races/denominations/etc in the Bletchley & Fenny Stratford Town Council area.

Please do not hesitate to contact the staff at Bletchley and Fenny Stratford Town Council should you wish to meet with us or to discuss any issues relating to your Grant Application.

Please return completed form to:
The Clerk
Bletchley & Fenny Stratford Town Council
74-76 Queensway
Bletchley
Milton Keynes
MK2 2SA
Tel No: 01908-649469
e-mail: info@bfstc.co.uk

IMPORTANT INFORMATION, PLEASE NOTE:

If your application is successful, in accordance with the Local Council Act 1972, it is a requirement that having received a grant from this Council, you must provide a statement setting out the way in which the money has been applied.

- This can be done by:
- a) Sending us copies of the relevant invoices and/or receipts, or
 - b) By sending this Council a statement setting out the way in which the money has been applied, or
 - c) By supplying this Council with a copy of your annual report and accounts

If this application is successful Bletchley & Fenny Stratford Town Council expects acknowledgement of the fact in any relevant advertising relating to the item/event/etc. Your group will also be required to submit an article about your activities in the Town Council newsletter 'The Neighbour'.

Please note that grant payments can only be made retrospectively. The Town Council will only make advance payments of grants in exceptional circumstances.

Bletchley and Fenny Stratford Town Council



**GRANT AID APPLICATION FORM
FOR LOCAL PROJECTS**

| | | |
|--|-----|----|
| 1. Name of Applicant/Organisation | | |
| 2 a) Aims & Adjectives of Organisation | | |
| b) Please attach a copy of your Equal Opportunities statement. Bletchley and Fenny Stratford Town Council can provide advice on this if necessary. | | |
| 3) Does Your Organisation Have: | | |
| (please tick relevant box) | Yes | No |
| A Constitution* | | |
| Accounts** | | |
| Charity Registration Number (if yes please state): | | |
| *Please enclose a photocopy of the constitution | | |
| ** Please enclose a photocopy of your most recently approved accounts | | |
| If the answer is No to a) or b) please advise on administration procedures for your organisation | | |

4. Please give a brief summary of activities and frequency of meetings, if applicable

5. Please give details of the project the grant is for, and the intended start date.

6. What particular need do you consider the project will meet?

7. How have you identified the need for this project?

8. Please give a reasonably accurate figure for the number of people, within Bletchley & Fenny Stratford Town Council's area, the project will serve. If possible, please provide evidence of this within the Data Protection Act:

9. Please give a brief outline on how this project benefits the residents of Bletchley & Fenny Stratford Town Council's area.

10. Where will equipment be kept and how will it be insured?

11. What is the total cost of the project?

12. Amount requested from Bletchley & Fenny Stratford Town Council and for what purposes (please be as specific as possible)

13A - Have you applied for funding from other sources for this project?

(please tick box)

Yes No

13B - Have you applied for funding from other sources for any other project which may relate to this funding request?

14. If yes, please indicate how much and who from

15. Address where activities will take place

16. Contact name, address, phone number and/or email address (this must be someone who has full knowledge of the application and can answer questions about it)

Name Tel No.....

Address.....

.....

.....

Date of Application..... Email.....

| |
|--|
| 17. Name of Chairperson..... Telephone Number..... Name of Treasurer..... Telephone Number..... Name of Secretary..... Telephone Number..... |
| 18. Please give details of your Bank/Building Society Account: Bank/Building Society..... Name of Account Holder (cheque payable to)..... Address..... Sortcode Account No..... |

Please return completed form to:

**The Clerk
Bletchley & Fenny Stratford Town Council
74-76 Queensway
Bletchley
Milton Keynes
MK2 2SA
Tel No: 01908-649469
e-mail:info@bfstc.co.uk**

We will be in touch if further information is needed.