

Grant Application Form (Trustees' Fund)

The information on this form will help us process your application.
Please contact us if there is anything you do not understand.

1. Contact Details

Name of Organisation

Address
Postcode

The first contact person should be someone from your organisation who can discuss the application. Please give an alternative person in case the first contact is unavailable.

First Contact

Name

Position

Telephone (Daytime)

Telephone (Evening)

Email

Second Contact

Name

Position

Telephone (Day)

Telephone (Evening)

Email

3. About the project that you are asking us to fund

Describe the project or activity that you want the grant for

How much will the project cost in total?

£

Where do you expect the money to come from?

Please indicate money already secured with an S


Source	Amount

What are you asking us to fund with the grant?

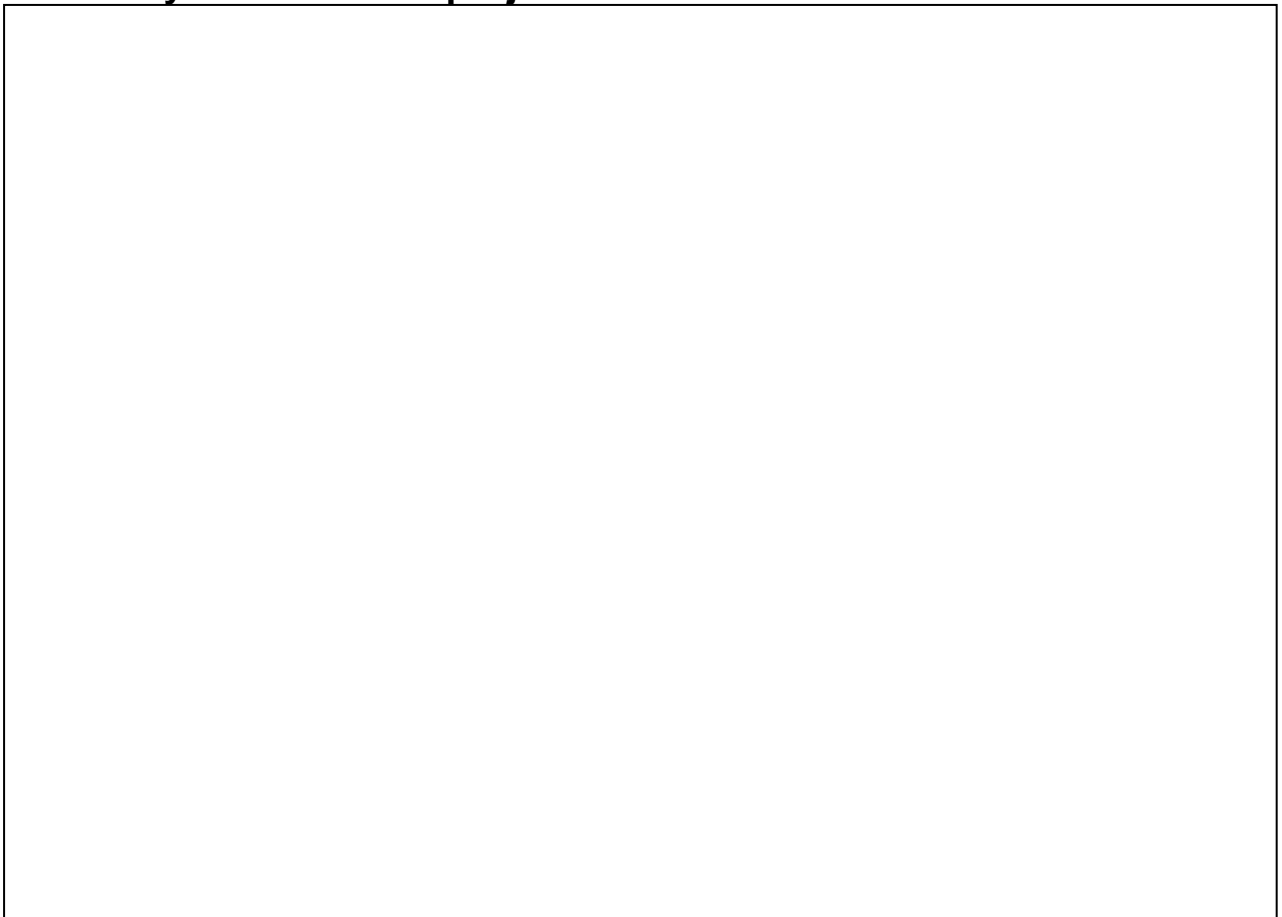
Please provide a more detailed budget on a separate sheet if needed

Item	Total Cost	Requested

Why is the project needed?



How will you know if the project is a success



4. Administrative Information

Please give contact details for someone who will be an independent referee for your application.

Name

Address
Post Code

Telephone	Email
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Please give us your bank details

Account Name

Bank or Building Society	
Address	
Postcode:	
Account Number:	Sort Code:

May we give your group's contact details to the press? Yes/No

5. Declaration

1. I am authorised to make the application on behalf of the above organisation
2. I certify that the information contained in this application is correct
3. If the information in the application changes in any way I will inform the Community Foundation
4. I give permission for the Community Foundation to record the details of my organisation electronically and to contact my organisation by telephone, mail or email with information about its activities and about funding opportunities.

Signed:	Date:
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Checklist

Please enclose the following with your application. We will only process your application when all the relevant information is received.

- Latest annual accounts
- Governing Document i.e. Set of Rules, Constitution or Memorandum and Articles
- A list of your Trustees/Management Committee Members or Company Directors
- Equal Opportunities Statement
- Child Protection or Vulnerable Adult Policy (if applicable)
- Copies of written estimates or catalogue pages if you want a grant for equipment
- Health and Safety Assessment where risks are involved e.g. children's trip

Please keep a copy of the application for your records

Please call Thames Community Foundation to ask about closing dates for sending in your application.

Please send completed applications to:

Thames Community Foundation
NPL Building 1, Room 201
Hampton Road
Teddington
TW11 0LW

Telephone: 020 8943 6030

Email: grantstcf@btconnect.com

Registered office:

Thames Community Foundation, NPL Building 1 Rooms 201-206, Hampton Road, Teddington, Middlesex TW11 0LW

Company limited by guarantee, company registration number: 6251399

Registered Charity Number: 1122432