Folkestone Town Council

*Ward Grant Application Form*

**A: APPLICATION SUMMARY**

|  |  |
| --- | --- |
| **Organisation Name:** |  |
| **Title of Project:** |  |

|  |  |
| --- | --- |
| Contact name *(Inc. title)* |  |
| Position in organisation / group: |  |
| Correspondence Address: |  |
| Postcode:  |  |
| Email address: |  |
| Daytime telephone number: |  |

|  |  |
| --- | --- |
| Reason for application – brief project/event description: |  |

|  |  |
| --- | --- |
| How much is requested from Folkestone Town Council?  | £  |
| Total cost of project: | £ |

**Declaration:** I hereby declare that all information provided is true and accurate to the best of my knowledge. I agree to complete and return any forms relating to this application which are sent to me in the future:

|  |  |
| --- | --- |
| **Name:** | **Position in the organisation:** |
| **Signature:** (or print name if returning by email) | **Date:** |

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| --- |
| **DATA PROTECTION STATEMENT****Your details will be kept securely by Folkestone Town Council under the terms of the****Data Protection Act and Freedom of Information Act 2000**FTC must protect public funds and may use personal information and data-matching techniques to detect and prevent fraud, and ensure public money is targeted and spent in the most appropriate and cost-effective way. In order to achieve this, information may be shared with other bodies responsible for auditing or administering public funds including the Audit Commission, the Department for Work and Pensions, other local authorities, HM Revenue and Customs, and the Police. We might use personal information provided by you in order to conduct appropriate identity checks. If you provide false or inaccurate information in your application or at any point in the life of any funding we award you and fraud is identified, we will actively seek recovery of the awarded grant funding, and will provide details to fraud prevention agencies, to prevent fraud and money laundering.The information provided on this application will be held on a database and used to provide information to officers and members of the Town Council.Organisations are asked to agree to allow its details to be used in the Town Council’s website, publications and other materials. Do you agree for your organisation’s details to be included? (Please note that personal and financial details will not be published.)**Please select as applicable**Yes [ ]  No [ ]  |

**B: THE PROJECT/EVENT**

|  |  |
| --- | --- |
| Title of Project: |  |
| Description of project/event: |
|  |
| What type of organisation / group are you? |
| Registered Charity |[ ]  Community/Voluntary organisation |[ ]  Sports organisation |[ ]
| Church / Faith group |[ ]  Not for Profit Company  |[ ]  Parish / Town / District council |[ ]
| KCC Service |[ ]  School/College/ Pre-school  |[ ]  Youth organisation |[ ]
| Other, please specify: |  |

**C: FINANCIAL DETAILS**

|  |  |
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| Estimated total cost: | £ |
| Please detail the components of your project/event i.e. your budget or costings (submit on a separate sheet if necessary): |
| *Expenditure* | £ |
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| *Total*  |  |
| Please give details of any other funding you have, or are applying for in relation to this project: | £ | Confirmed |
| Contribution from Folkestone Town Grants (Please list all members you have applied to for this application below, or on a separate sheet if necessary) |  |  |
|  |  |[ ]
|  |  |[ ]
|  |  |[ ]
|  |  |[ ]
| Contribution from F&H District Council |  |[ ]
| Contribution from Kent County Council  |  |[ ]
| Contribution from National Lottery |  |[ ]
| Contribution from other organisations (please specify) |  |[ ]
|  |  |[ ]
|  |  |[ ]
|  |  |[ ]
| Contribution from fund raising events  |  |[ ]
| Contribution from own resources |  |[ ]
| **TOTAL FUNDING (to agree to total cost identified in estimated total cost)** | £ |
| In the past three years has your organisation/group received previous grant from Folkestone Town Council. **If yes, please complete the form below** | Yes |[ ]  No |[ ]
| Project Name | Amount £ | Date Received |
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**D: ADDITIONAL INFORMATION**

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| Do you have a bank account, which requires two unrelated people to authorise cheques and make withdrawals (including debit card or internet purchases and cash withdrawals)? This must be a business bank account not a personal one. | Yes [ ]  No [ ]  |

**Any award will be paid by BACS. Please enter you bank details below:**

|  |  |
| --- | --- |
| **Name of applicant:** | **Account name:** |
| **Signature:** (or print name if returning by email) | **Date:** |
| **Sort Code:** | **Account number:** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Please return your completed form to your Ward Councillor, you can find your Ward Councillor details on the Town Council website; folkestone-tc.gov.uk**

**E: WARD COUNCILLOR SUPPORT**

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| **Ward Councillor to complete:** |
| **Name:** | **Ward:** |
| **Signature:** (or print name if returning by email) | **Date:** |
| **Amount Awarded**  | **£** |