

## **Information re Grant Application Form**

If you are an organisation, society, or similar body, looking for financial assistance, you are welcome to contact the Community Council using the attached application form.

The closing date for any application is 1<sup>st</sup> January of any year; each application is discussed at the first Community Council meeting of the year (this is usually the 1<sup>st</sup> Tuesday of the month).

The information required is:

1. Full name of the organisation
2. Contact information
3. Main activity of the organisation
4. Annual income details
5. Details of any financial support received
6. Full details of the application

We do not offer financial support for general running costs e.g. insurance; the application needs to be for a specific reason.

The following criteria needs to be met for the application to be successful:

1. Serves the local Community
2. Serves Ceredigion as a whole
3. Specific sum requested
4. For the request clearly stated
5. Copies of Bank statements enclosed

**Cyngor Cymuned Troed yr Aur Community Council**

**Cais am Grant / Grant Application**

**Part 1 - background**

Full name of society / association \_\_\_\_\_

Main address of society / association \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Main activity your society / association

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What is the annual income of your society / association? (This information is essential.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has your society / association got a separate savings account? If so, please enclose a copy of the most recent report.

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Have you received any financial support for this project from any other source e.g. Ceredigion County Council.

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**Part 2 – Your application**

Give a brief outline of your application.

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How will your society / association benefit from this financial support from the Community Council?

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Please provide details of how this grant will be used.

| Cost                   | Contribution from Troedyraur CC | Other contributions if relevant |
|------------------------|---------------------------------|---------------------------------|
| Example – office costs | £50                             | Own funding - £50               |
|                        |                                 |                                 |
|                        |                                 |                                 |
| Total                  | £50                             |                                 |

**Part 3 – Contact details**

Name of legally responsible person

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Address

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Role in society / association \_\_\_\_\_

Signature \_\_\_\_\_

Date. \_\_\_\_\_