



Shap Community Enterprise

Grant Application Form

Please fill in all relevant sections of the application form. We aim to make our application process as simple as possible but if you require support or clarification in answering any questions please contact D Newsome, Elaine Allison or e-mail enquiries@shapcharityshop.co.uk

Please check our website for latest application deadlines www.shapcharityshop.co.uk

About your organisation

1	Name of your organisation	
2	Contact Person	
3	Position in the Organization	
4	Address for Correspondence	
5	Telephone Number	
6	E-mail Address	
7	Website Address	
8	Charity or Company Number	
9	Date Established	
10	Status	Is the organisation a registered charity / registering as a charity / unincorporated association / limited company / self-help group / statutory body / development trust / other?

If you have any questions about whether your group is eligible to apply, how to fill in the form or what you can apply for please don't hesitate to contact us at enquiries@shapcharityshop.co.uk.

11	What is the main objective and activity of your organisation?	
12	How many people are on your Management Committee?	
13	What is the name of your bank account? How many people are required to sign cheques?	Name of Bank A/C? No. of signatories required?
14	How many volunteers does your organisation have?	

About your project or activity

15	Name of the project or activity that you are applying for funding for? (Maximum 10 words)	
16	Is this a new project or activity?	Yes / No
17	Where will the project or activity take place?	
18	When will the project or activity start?	

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19	What does the project or activity involve? (Maximum 200 words)	
20	Who will benefit from the project or activity? (Maximum 50 words)	
21	How many people will benefit from the project or activity? (Maximum 25 words)	

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22	<p>What difference will this project or activity make to the lives of those involved?</p> <p>(Maximum 150 words)</p>	
23	<p>What is the total cost of the project or activity you are applying for?</p>	£
24	<p>If you are not applying for the full amount of the project or activity how will you make up the shortfall?</p> <p>(Maximum 50 words)</p>	

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25	What will happen to the project or activity once funding has finished? (Maximum 100 words)	
26	Supplementary information	Please attach any other information you think might support your application.

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Project or activity budget

27	Project costs (Please tell us the total cost of your project or activity)	Item	Cost
		Total project costs	£
28	Other Income (Let us know if you will get other funding towards your project or activity)	Funding Source	Amount

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		Total other income	£
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29	What is the total funding you are requesting from us?	£
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Documents we require			
29	Please supply us with copies of the following documents (If you are unable to do so, or they are in development please detail below)		Enclosed
		Your organisations constitution or rules	Yes / No
		A copy of your latest audited accounts (or your latest bank account statement if you have no audited accounts available)	Yes / No
		A copy of your child protection and safeguarding policy if you work with children and young people under 18	Yes / No

Declaration			
30	A member of your management group or committee needs to sign this application	Signed	
		Print Name	
		Position	
		Date	

Please e-mail this completed application, along with any supporting documents, to enquiries@shapcharityshop.co.uk or post to

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D Newsome Beech House, Shap, Penrith, Cumbria

Alternatively you can drop it off at Second Chance charity shop F. A. O Elaine Allison

Thank you

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