

THE MARY SALMOND TRUST Funding Application

Section 1 – Application On Behalf Of An Organisation Or Group			
Organisation Name		Tel. No	
Address		Post Code	
		E-mail	
How long has your organisation been in existence?			
Are you a branch of a larger organisation?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a Registered Charity		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Charity No		Date Established	
Is your charity subject to regulation?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Care Commission <input type="checkbox"/>		Disclosure Scotland	<input type="checkbox"/>
Other <input type="checkbox"/> Give Details			

Contact Details	The person who is applying on behalf of the organisation		
Applicant's Name		☎ Daytime	
Job Title		☎ Evening	
E-mail		☎ Mobile	
Give a brief summary of the work of your organisation			

How is your organisation governed and managed?

How is your organisation staffed?

No. Full-time

No. Part-time

No. Sessional

Paid Staff

Volunteers

Section 2 – About Your Project

Please tell us what you require the funding for, give details of the specific activities associated with your project – refer to the guidelines. (maximum 500 words)

Who will directly benefit from this grant and how? – refer to the guidelines. (maximum 500 words)

It is important the Trustees have a clear understanding of the potential impact of the grant award. We are interested to know about the people who will directly benefit, the difference it will make to their lives and the wider community.

Section 3 – Finance

Tell us how you are planning to fund your project – refer to the guidelines. (maximum 500 words)

Please tell us your total income and expenditure for the last full financial year

Income Year / £	Expenditure Year / £
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Please enclose a full copy of your Annual Accounts for the above year.

Give full details of the expenditure of the grant required. *(Please provide quotes for equipment or work to be carried out).*

	£
TOTAL	£

Section 4 – Previous Applications

Have you previously applied to the Trust for a grant? Yes No

Was your application successful? Yes No

If yes, please give details of the date of application, the amount received, how the grant was used and the outcome of the project.

Section 5 – Reference And Declaration

The Referee must be willing to talk about your application and sign and date this form. Please provide the details of an individual who is independent but knows you well or, who can confirm the details of your application.

Title and Full Name <i>(Dr, Mr, Mrs, etc.)</i>			
Organisation <i>(if applicable)</i>		Post Held <i>(if applicable)</i>	
Address		☎ Daytime	
		☎ Evening	
		☎ Mobile	
Post Code		Email	

Referee's Statement

To the best of my knowledge, the information given on this form, gives a true and accurate account and I can talk to you about this grant request if required.

Signed _____ Date _____

Declaration

I can confirm that to the best of my knowledge and belief, all the information in this application is true and correct.

Signed _____ Date _____

Data Protection Act 1998

To comply with this Act, the Trust requires the applicant's consent to use personal data supplied by the applicant in the processing and review of a grant application. This includes transfer to and use by such individuals and organisations as the Trust deems appropriate. The Trust requires further assurance that personal data about any other individual is supplied to the Trust with his/her consent. A signature on the Application Form confirms this assent and assurance.