*Please ensure this form is filled in completely and ensure you have read the Community Grants Policy. This form is for an application for a grant of up to £500. For deadlines, please see the Town Council website.*

**Royston Town Council**

**Community Grants**

**Scheme Application**

**Office Use Only**

Received

Validated

Committee Date

To start a new line in a text box, press SHIFT and ENTER together.

**Privacy:** Your name, position, email address and address will be disclosed to the committee when considering the application. All other information on this form will be made publicly available via the Town Council website as part of the agenda for the committee meeting. -------------------------------------------------------------------------------------------------------------------------

**CONTACT INFORMATION**  **NAME**Click here to enter text.

**POSITION IN ORGANISATION** Click here to enter text.

**E-MAIL ADDRESS** Click here to enter text.

**ADDRESS** Click here to enter text. **ABOUT YOUR ORGANISATION**

**NAME OF ORGANISATION** Click here to enter text.

 **ORGANISATION TYPE** Community Organisation **[[1]](#footnote-1)** [ ] RegisteredCharity[ ]

**DO YOU HAVE A CONSTITUTION OR GOVERNING DOCUMENT?**  Yes[ ] No[ ]

**WHAT ARE THE AIMS AND OBJECTIVES OF YOUR ORGANISATION?**

Click here to enter text.

**PLEASE PROVIDE DETAILS OF YOUR ORGANISATION’S MEMBERSHIP***This should include the geographical area your members are drawn from, membership numbers etc.*

Click here to enter text.

**HOW IS YOUR ORGANISATION MANAGED?**

Click here to enter text.

**HOW MANY PEOPLE ARE INVOLVED IN YOUR ORGANISATION?**

**TRUSTEES / COMMITTEE MEMBERS** Click here to enter text.

**STAFF** Click here to enter text.

**ABOUT YOUR PROJECT**

**TOTAL PROJECT COST £** Click here to enter text.

**CONTRIBUTION FROM OTHER SOURCES £** Click here to enter text.

**TOTAL REQUESTED FROM TOWN COUNCIL £** Click here to enter text.

**PLEASE DETAIL THE CONTRIBUTIONS FROM OTHER SOURCES** *This would include grants from other bodies, use of own funds etc*

Click here to enter text.

**PLEASE DETAIL ANY NON-FINANCIAL ‘IN KIND’ SUPPORT YOU HAVE FOR YOUR PROJECT***This would include time given by volunteers, donations of goods/services etc*

Click here to enter text.

**DOES THIS PROJECT INVOLVE COLLABORATION WITH OTHER ORGANISATIONS? PLEASE DETAIL THEIR INVOLVEMENT**

Click here to enter text.

**PLEASE EXPLAIN THE PROJECT***This should explain the objectives of the project and benefits to the Royston community*
Click here to enter text.

**WHICH OUTCOMES DO YOU BELIEVE YOUR PROJECT MEETS?**

|  |  |  |
| --- | --- | --- |
| *Provides a new, or improves an existing asset or service benefiting a significant percentage of Royston residents* |  |  |
| *Enhances the profile and/or reputation of Royston* |  |  |
| *Assists local organisations to develop and achieve their aims and objectives that benefit the whole or part of the community of Royston* |  |  |
| *Supports community and voluntary groups in the town who provide community activities* |  |  |

 **PLEASE SET OUT HOW YOU BELIEVE YOUR PROJECT MEETS THE OUTCOMES**
Click here to enter text.

**WHICH OF THE COUNCIL’S STRATEGIC AIMS DO YOU BELIEVE YOUR PROJECT ALIGNS WITH?**

|  |  |  |
| --- | --- | --- |
| Making efforts to preserve and enhance biodiversity and reduce carbon emissions |  |  |
| Supporting and promoting diversity, equality and inclusion in Royston |  |  |
| Encouraging, supporting and promoting volunteer organisations and charities |  |  |
| Ensuring green and open spaces, trees and woodlands are protected, maintained and safeguarded |  |  |
| Promoting sustainable travel within in Royston  |  |  |

 **PLEASE SET OUT HOW YOU BELIEVE YOUR PROJECT ALIGNS WITH THESE AIMS**
Click here to enter text.

 **HOW WILL THE GRANT BE SPENT?***Please be as detailed as possible. The sum of the items should match the amount requested from the Town Council. For any expenditure on the purchase of goods over £250 you must demonstrate that best value has been sought by submitting 2 quotations.*

|  |  |  |
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 **IF THE COUNCIL IS UNABLE TO FUND YOUR PROJECT WHAT WOULD THE IMPACT BE?**Click here to enter text.

**DO YOU HAVE SUITABLE PUBLIC LIABILITY INSURANCE TO COVER YOUR PROJECT** Yes[ ] No[ ]

**ADDITIONAL INFORMATION***Please provide any information relating to your project that you believe the Town Council should be aware of. Please also provide an explanation of any expenditure that you feel is not self-explanatory. Please also provide an explanation of any expenditure that is for consultancy.*

 Click here to enter text.

Please submit the following with your application:

* The previous financial year’s accounts and a recent (within three months) bank statement.
* New/start-up organisations should submit a financial statement containing your proposed budget.
* Quotations as detailed in the Community Grants Policy

Please return application and supporting documents to: deputytownclerk@roystontowncouncil.gov.uk

1. Includes volunteer organisations, clubs and groups that are not a Registered Charity. [↑](#footnote-ref-1)