

Maryport Town Council

FUNDING APPLICATION FORM

Funding Application Form, Once it has been completed, please return it to

Mrs L M Douglas Maryport Town Hall, Senhouse Street Maryport CA15 6BH

Please ensure you answer all of the questions in as much detail as possible

Thank You

Application Number.....

Name of Organisation.....

Contact Person.....

Address.....
.....

Telephone number.....

Mobile Number.....

1. Please summarise the nature of the Project for which you are seeking funding.....
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2. Which (groups) of people will benefit from this project.....
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.....
3. What are the expected outcomes from this project.....
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.....
4. Indicate the estimated total cost of the project, amount requested from MTC and funding available or requested from other sources. Is their funding conditional on support from MTC.....
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5. What consultation has taken place with the community regarding this project.....
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.....
6. Who is leading this project.....
.....
7. Please attach copies of accounts.....
.....
8. Are the persons involved CRB checked if so please attach copies.....
.....
9. Is the organisation a registered Charity.....
Charity Reference No. (if applicable).....
10. How much are you applying for?
Please note if you are asking for an amount greater than £1000, this application form will only be looked at during the Budget meeting which takes place in October, the funding amount agreed will then be paid during April of the following year. For all requests of £1000 or more we also need the following information.....Names of Directors, Trustees & Management Committee members.

11.
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Signed:.....Date:.....