Shavington-cum-Gresty Parish Council
Main Rd, Shavington, Crewe, CW2 5DP

8. SHAVINGTON-CUM-GRESTY PARISH COUNCIL COMMUNITY GRANT SCHEME APPLICATION FORM

(Grants up to £5,000)

To be returned to Clerk to Shavington-cum-Gresty Parish Council at clerk@shavingtononline.co.uk or Main Road, Shavington, Crewe, CW2 5DP

Contact details

Applicant name:	
Organisation:	
Address:	
Contact number:	
E-mail address:	

Project details

Organisation:	
Location of organisation:	
Project name:	
Short project description:	
If you receive a grant, briefly tell us what difference it will make to your organisation/area:	

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Project cost

Total cost of project:	
Amount requested from Shavington-cum-Gresty Parish Council:	
Amount of any confirmed match funding (this is preferred but not essential)	
Outstanding balance:	
If there is a balance outstanding, please tell us how the shortfall will be met:	
Please state organisations bank account name (who the cheque should be made payable to):	

Project beneficiaries

Please tell us how many people you expect to benefit if you were successful with your community grant application:	
Please tell us which geographical area will benefit most from your project or activity:	

Supporting documentation

Please complete the table below to indicate if you have the supporting documents.
You do not need to send these documents in with your application (apart from your Governing Document and Safeguarding Policies, which must be supplied by email or post within 7 days of submitting this application) but we may request copies at a later date.

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Up to date Annual accounts/income and expenditure	
Copy of your Governing Document (signed)	
Planning permission	
Relevant insurances	
Safeguarding policies	
Quotes/estimate for equipment	
Affiliation to a Governing Body	
Equalities and Inclusion Policy	

Data protection and consent
Please ensure that you read this section before submitting your application.

Grant application administration
Part or all of the information you supply to us will be held on our IT system. This information will be used for the administration of grant applications and for statistical analysis.
Copies of your application, but with personal details redacted, will be provided at the relevant council meeting for consideration of awarding the grant.

For transparency purposes, information about successful grant applications is added to our website and made available to the local press. The press may request contact details of someone able to provide additional information.
Please indicate below if you consent to us passing on your name and email address to the local press for this purpose.

Yes / No

Grant application support

Please indicate below if you agree if you agree to Shavington-cum-Gresty Parish Council contacting you by the following methods to provide feedback or offer additional support on completing this application:

Postal address Yes / No
Email address Yes / No
Phone Yes / No

Declaration
I certify that to the best of my knowledge all the information contained within this application is correct.

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I confirm that I understand, agree and accept the terms and conditions of this grant as set out in the Grants and Funding Policy.

Signed:	
Date:	
Name:	
Position in group:	

For further information on how Shavington-cum-Gresty Parish Council processes personal data, please view our privacy policy at www.shavingtononline.co.uk or call 01270 42 11 25