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**FAULDHOUSE AND BREICH VALLEY COMMUNITY DEVELOPMENT TRUST**

**Small Grant Fund 2024**

**Application Form**

* Please refer to the guidance notes when completing this form
* If you are not using a computer/laptop, please complete the application in **BLOCK CAPITAL LETTERS** and use **black ink**
* No project should start or commit expenditure before receiving the approval of funding
1. **PROJECT SUMMARY**
2. Full Legal Name of your Organisation:
3. Project Title:
4. Project Location:
5. Contact Person:
6. Position:
7. Address:
8. Telephone Number:
9. Email:
10. Project Start and Finish Date:
11. **ORGANISATION DETAILS**
12. Organisation Name:
13. Type of organisation:

1. What date was your organisation formed:
2. Are you a charity? If so, please quote your number:
3. What are the main activities of your organisation?
Please answer in no more than 100 words

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1. Do you have an equal opportunities policy or statement?
2. Does your organisation take account of equality issues around age, disability, gender, race, religion, or belief?
3. **PROJECT DETAILS:**
4. Project Location:
5. Project Description: Please describe the project for which you are seeking funds

 No more than 500 words.

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1. **PARTNERSHIP WORKING:**
2. Is the project, for which you are seeking funds, a joint/partnership initiative?

If YES, please list partners

1. **COSTS**

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| **Item of expenditure** | **Cost** |
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| **Amount of funding requested (maximum £2,000)** |  |

1. **PROJECT MANAGEMENT**
2. Describe how your project will be managed, administered, monitored and evaluated.

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**Declaration**

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| We wish to apply for Fauldhouse and Breich Valley Community Development Trust Resillience Grant Funding. The above is an accurate outline of the proposed project. We have read and understood the criteria for applicants and agree to the conditions of funding. We understand that the grant may be modified or withdrawn, if all the conditions are not adhered to. We are willing to co-operate in the monitoring of the grant scheme and to meet with their representatives if required to do so. |
| **Name** |  |
| **Position**  |  |
| **Organisation** |  |
| **Date** |  |

Please send your completed forms to:

**Small Grants**

**The Hub, 10 Main Street**

**Fauldhouse**

**West Lothian**

**EH47 9HX**

**Telephone: 01501 773 699**

**You can also submit your application by email to:** smallgrants@fauldhouse.org.uk

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| **Attachment checklist: You must provide the following documents with your application.** | **Please Indicate (x)** |
| Constitution or Articles and Memorandum |   |
| Committee Members or Directors List |   |
| Recent Bank Statement |   |
| Copy of Signed Annual Accounts(If your organisation has been operating for less than 12 months, please give details of your expected income and expenditure from the date your organisation was set up) |   |

**Deadline for Applications: 12pm on Friday 14th February 2025
*(No Applications will be considered if they are submitted after this date/time)***