***\*\*\*Please Speak to Your Community Engagement Officer Before Completing this Form\*\*\****

*Please see the map enclosed for all contact details. Also online:* [www.testvalley.gov.uk/ceofficers](http://www.testvalley.gov.uk/ceofficers)

Once complete, please e-mail this form to your Community Engagement Officer. If you are unable to return this form via e-mail, please discuss with your Community Engagement Officer.

1. **Please enter details of your organisation/group**

|  |  |
| --- | --- |
| Organisation/Group name: |  |
| Registered Charity Number:  (if applicable) |  |

1. **Please enter details of the main contact for this application**

|  |  |
| --- | --- |
| Contact name: |  |
| Position held in organisation/group: |  |
| Contact telephone numbers: | Landline: |
| Mobile: |
| Email address:  (be clear if case sensitive) |  |
| Postal address: |  |

1. **Please provide a brief description of your project and what you require the grant for, with an approximate breakdown of the costs of each element / resource required.**

|  |  |
| --- | --- |
|  | |
| How much are you applying for?\* | \*Maximum of £500 |
| In which Parish / Town is your project based? |  |
| Is the Parish / Town Council aware of the project? |  |
| Are you aware of any organisations that provide similar or complementary services in the area? |  |
| Please give details of how you will link with them to avoid duplication and maximise the impact of the grant? |  |

1. **Please provide bank details – so successful applicants can receive payments quickly**

|  |  |
| --- | --- |
| Who would be in receipt of and hold the grant money if awarded? |  |

|  |  |
| --- | --- |
| Account Name: |  |
| Sort Code: |  |
| Account Number: |  |

**Declaration**

I declare that to the best of my knowledge, the information I have provided on this application form is correct and the grant will be used for the purpose stated on this form.  I understand that if I have knowingly provided a false statement this application will be void and I may be subject to prosecution.

By putting your name on this application form you are confirming that you have read, understood and agree to the terms and conditions of this grant.

Signed:

Date: