

# **ALDERMAN NEWTON'S EDUCATIONAL FOUNDATION LUBENHAM GRANT APPLICATION FORM (Youth groups)**

*If there is not enough space on the form, please attach additional sheets. If you are applying for multiple projects it may be necessary to complete separate forms for each project.*

## **Section 1. Group details**

<b>Name of group:</b>	
<b>Address for correspondence :</b>	
<b>Postcode:</b>	

<b>Contact Details:</b>	
<b>Telephone:</b>	
<b>Mobile:</b>	
<b>Fax:</b>	
<b>Email:</b>	
<b>Website:</b>	
<b>Name of main contact for this application:</b>	

## **Section 2. About your group**

<b>Purpose of the Group</b>

<b>Number of participants:</b>	
<b>How many under 18's involved</b>	
<b>How many will benefit from the project?</b>	
<b>Area covered</b>	

**Please tell us any other details that you think are relevant:**

**Please describe how the funding for which you are applying will benefit your group**

### **Section 3. Your application**

**Please describe the project or activity for which you are seeking financial support.**

<b>Expected start date:</b>	
<b>Expected completion date:</b>	

**Please continue on a separate sheet or attach supporting documents as necessary.**

<b>Item:</b>	<b>Cost:</b>
	£
	£
	£
	£
	£
	£
	£
<b>Total applied for:</b>	<b>£</b>

**Other Funding**

Please tell us about any other charitable trusts or sources of funding to which you will apply/have applied/will use for **this project**, including any contribution the school will make from its own resources.

<b>Other funding sources:</b>	<b>Amount:</b>	<b>Confirmed yes/no</b>
Own funds		
Donations		
Other charity sources		

**What will happen if the Foundation is unable to allocate funds or to provide the full amount of funding requested?**

**Section 4. Financial information**

<b>Has your group applied to Alderman Newton’s Educational Trust in the previous 3 years? If so please give details and outcome of grant award.</b>	

Please provide the name of the account to which a grant cheque should be made payable if application is successful:

## Section 5. Signatures

<b>Leader of the Group</b>
Name:
Signature:
Date:
<b>Treasurer</b>
Name:
Signature:
Date:

Please enclose a copy of your current financial position.

Please return your completed application form to:

The Clerk to the Trustees

Alderman Newton's Educational Foundation

[sue@harborough-anglican.org.uk](mailto:sue@harborough-anglican.org.uk)

or post to

Sue Macdonald, Harborough Anglican Team Administrator, c/o Team Office, St. Dionysius Church, Market Harborough, Leics, LE16 7NB 01858 469330 / 07977 878094

If you need any help completing the application form, or have any questions about your application, then please telephone or email – see above