



Your Community – Our Support

Application for Small Grants from CRICKLADE TOWN COUNCIL

Please ensure that you have read the Guidance Notes before completing this form.
If you need help completing the form please contact us by telephone on 01793 751394 or by e-mail at admin@cricklade-tc.gov.uk
Please complete all sections.

Section 1 – Tell Us About Your Organisation

- 1a Name of organisation
- 1b Contact person
- 1c Contact address
- 1d Contact e-mail address
- 1e Contact daytime telephone number

Section 2 – Tell Us About Your Application

- 2a What does your project aim to achieve?
- 2b How will this project benefit Cricklade (e.g. who and how many will it benefit)
- 2c Has your organisation received a previous grant from this Council? Yes No
- 2d If yes, please provide details of the date(s) of application and the amount(s) awarded

Please continue overleaf

Section 3 – Tell Us About The Financial Aspects Of Your Application

3a	Projected Expenditure	£	
	Total Projected Expenditure:	£	_____
3b	Projected Income (including fundraising and project income from other sources)	£	
	Total Projected Income:	£	_____
3c	Total Projected Shortfall (i.e. projected expenditure minus projected income)	£	
3d	GRANT NOW SOUGHT	£	_____
3e	Please tick this box to indicate that you have attached last year's financial accounts.		<input type="checkbox"/>

Section 4 - Declaration

4a I confirm that the information on this form is correct, that any grant received will be spent on the activities specified, and that I will complete the small grants monitoring form (if requested by Cricklade Town Council) upon completion of the project:

(signature)

(printed)

(date application submitted)

Return to: TOWN CLERK
 CRICKLADE TOWN COUNCIL
 113 HIGH STREET
 CRICKLADE
 WILTS SN6 6AE
admin@cricklade-tc.gov.uk

Office Use Only:

Date Received:

Recommended award