Skipton Town Council

COMMUNITY GRANT

Application form

YOUR ORGANISATION	
Name of group:	
Main group contact: (full name and title)	
Position in group (Please confirm that you are authorised to apply for funding on the group's behalf)	
Address	
Telephone	
E-mail	
Additional contact (Please provide full name, position in group and email address)	
Please describe the aim of your organisation.	
Please advise if your organisation has any business or political links	
What is the structure of your organisation?	Informal group ☐ Registered charity ☐ Other ☐ Please give details below ……
What kind of insurance does your organisation have? *You may be required to submit copies of your insurance certificates*	
Please provide your most recent annual accounts	
Year Ended	
Total Income	
Total Expenditure	
Savings (reserves etc) *If your organisation is holding significant financial reserves please provide a full explanation of why these*	

cannot be used to cover the costs you are applying for	
Please describe your group's commitment to equality, accessibility, and diversity	
Please provide a copy of your groups safeguarding policy (if working with children, young people or vulnerable adults)	
Please describe your group's commitment to carbon reduction and sustainability	
YOUR SCHEME	
Description of the scheme for which you are applying for. Full details required. Continue on a separate sheet if necessary.	
What are the full costs of the scheme? Full details and list of costings required. Continue on a separate sheet if necessary.	
How will Skipton benefit from this scheme? Do most of your members live in Skipton? Please specify.	
Where is other funding for the scheme to come from? (Include name of the funder and the amount you expect from them)	
Please tell us the stage at which your other applications are at, i.e. just applied, awaiting outcome of application or funding confirmed.	.
What contribution to the scheme would you like from the town council?	£ Remember to attach quotes as appropriate.
Is this contribution for a specific element of the scheme? Please provide details and quotes, if required	

Supporting information checklist

Please ensure that the following documents are submitted with your application (accounts and bank statements must always be submitted).

	Tick to confirm enclosure
Three quotes for capital items and works over £500	
Copy of the most recent/audited accounts	
Evidence of planning permission (if necessary)	
Three most recent bank account statements together with details of the bank account that you would like the grant paid into	
Please supply the constitution, registered charity or company number of your organisation	
Evidence of appropriate insurance (if necessary)	
Evidence of your group's commitment to equality, accessibility and diversity	
Evidence your group's commitment to carbon reduction and sustainability	
A copy of your groups safeguarding policies	
Signature of applicant Date In signing this application, you agree that should your organisation be successful; you will acknowledge the contribution of Skipton Town Council in any of your publicity relating to this grant, if this condition is not met Skipton Town Council reserves the right to request repayment of the grant in full. Only one application per group in any one year is permitted. **If your organisation does not use the grant for its intended purpose the Town Council reserves the right to request the return of funds allocated**.	

Please return to:

The Chief Officer

Skipton Town Council,

45a Armoury Office

Otley Street

Skipton BD23 1FD

chiefofficer@skiptontowncouncil.gov.uk