Please read the attached guidelines before completing this form

To enable us to consider your application, all sections of the form must be completed

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| DETAILS OF THE ORGANISATION |
| **Full Name of Group** |  |
| **Age Group of members / clients / beneficiaries / users** |  |
| **Year established** |  |
| **Address (including postcode)** |  |
| **Email address** |  |
| **Website/Twitter/Facebook** |  |
| **Main Contact** | **Name** |  |
| **Position** |  |
| **Telephone** |  |
| **Email** |  |

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| **Organisation type** |  |
| **Charity No (if applicable)** |  |
| **Do you have a Constitution or Governing document?** | YES / NO |
| **Are your volunteers DBS checked?** | YES / NO |
| **Do you have a Protection of Vulnerable Adults policy?** | YES / NO |
| **Do you have a Bank account which requires two or more signatories?** | YES / NO |
| **Do you have a management committee?** | YES / NO |
| **Have there been any safeguarding concerns raised in the last 12 months****If ‘Yes’ please advise how these concerns were addressed at the end of this application** | YES/NO |

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| **OVERALL PURPOSE OF YOUR ORGANISATION** |
| **Please use this space to describe your organisation’s general aims and objectives. You can use your Mission or Vision Statement as a guide to summarising your work (max word count 250)** |
|  |
| **GRANT REQUEST** |
| **Total Project Cost** |  |
| **Amount of grant requested from J T Blairs Charity****Grants range from £250 to £2,000** |  |
| **Have you applied elsewhere for funding?** | YES / NO |
| **If yes please give details below** |
| **Funder** | **Amount** | **Secured** |
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| **What are your estimated project start and finish dates?** |
|  |
| **Please describe the purpose for which this grant is requested. Please provide copies of quotes or estimates for specific items.** |
|  |
| **Continued from above** |
|  |
| **What will be the positive outcome of the project for your group or community?** |
|  |
| **STATISTICS** |
| **Please provide the number of older people benefitting from your services currently and how many employees, volunteers and management committee members you have.** |
| **How many older people will benefit?** |  |
| **How many employees do you have?** |  |
| **How many volunteers will assist on this project?** |  |
| **How many members are there of the management committee?** |  |

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| **FINANCE** |
| **What was your income for the last financial year?** |  |
| **How much was your expenditure?** |  |

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| **BANK ACCOUNT DETAILS** |
| **Account Name** |  |
| **Sort Code** |  |
| **Account Number** |  |

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| **SIGNATURES** |
| **To the best of our knowledge the information provided in this application is correct and we agree to keep to the terms and conditions outlined in the guidelines should any aid be provided. We understand that the completion DOES NOT guarantee that any funding will be approved. We also agree to contact JT Blair concerning ANY changes to the details provided on this form.** |
| **Signed on behalf of the organisation:** |  |
| **NAME (block capitals):** |  |
| **Position in the organisation:** |  |
| **Date** |  |

Completed forms and documentation to be emailed to: jtblairs@gmail.com

*The Trustees retain the right to amend or alter the requirements for grant applications as necessary*

**CHECKLIST**

Have you included the following documents?

* Copy of your Constitution
* Vulnerable Adults Policy
* Most recent Accounts
* Most recent Bank statement (produced within the last three months) – for groups established for less than one year
* Costings/estimates where applicable

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| **Please provide details of how any safeguarding concerns raised in the last 12 months were addressed?** |
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