

COMMUNITY AND HOUSING INVESTMENT PARTNERSHIP FUND APPLICATION FORM

FOR FUNDING APPLICATIONS OF LESS THAN £50,000

1. Contact details

Organisation name

Address of organisation

Main contact for this application

Name:

Job title/position in organisation.....

Telephone:

Email:

If you have specific communication needs please tell us what they are

2. Type of organisation

Please let us know what type of organisation you are by ticking the relevant box and including any company or charity registration numbers.

Public sector

Voluntary and community sector Charity number (if registered)

Other Please explain

3. What are your organisation's activities? 300 words maximum

4. What activities/project will you undertake if you receive a grant? Please include start and end dates for your project. 1,000 words maximum (insert an additional sheet if needed)

5. Please list up to five project outcomes

Outcome	How this will be monitored

6. How does your project fit the aims of the CHIP Fund? 250 words maximum in each box

a) Development of facilities for community benefit

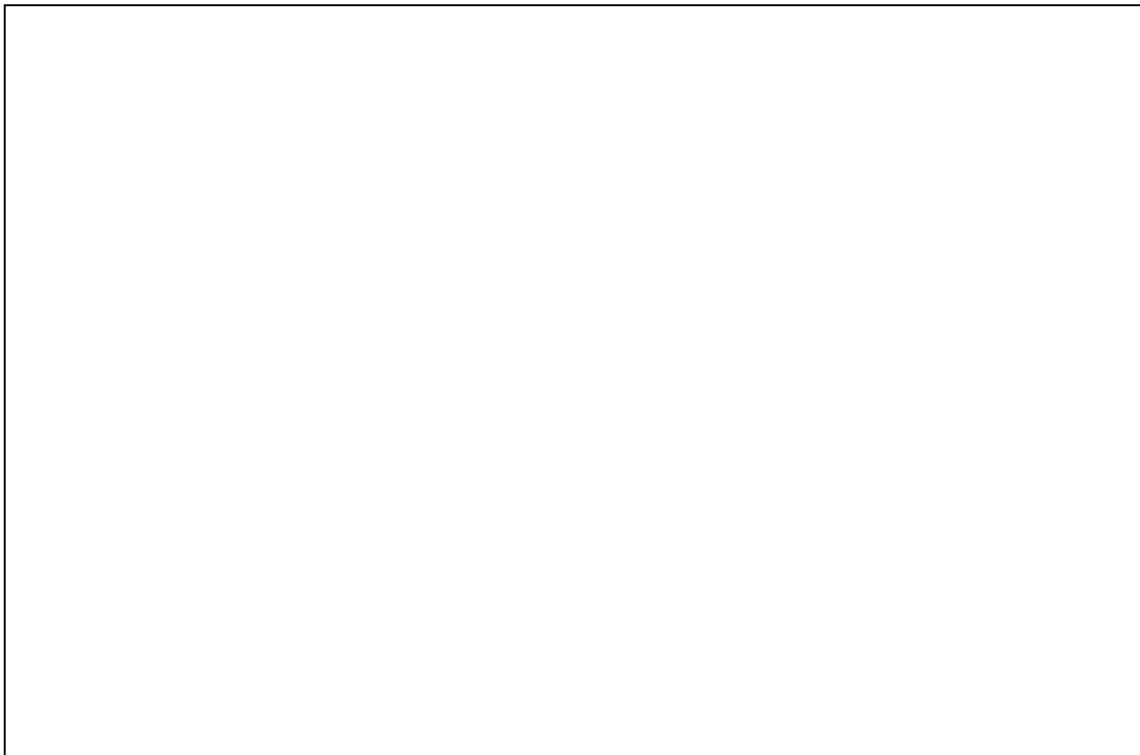
b) Environmental improvements

c) Regeneration activities

7. How have you involved and consulted with local people when developing this project? 600 words maximum



8. How does your project/activity fit with local and/or national policies and strategies? 600 words maximum



9. Please outline who will benefit from this funding? 500 words maximum

10. How many people will benefit from this funding?

11. If you will be working with young people or vulnerable adults please confirm you have appropriate safeguarding policies in place (tick the relevant box).

Yes No

12. Project costs (you may insert your own budget plan)

Project item/activity	Cost (£)	Amount requested
TOTAL		

13. Match funding

Funding organisation	Amount	Secured/pending

14. If you are planning to continue your project when our funding ends, how will you achieve this?

15. Signatories

I declare that the information I have given on this form is complete and correct.

Name	
Position in organisation	
Signature	
Date	

Data Protection Act 1998

We will use the information you give us on this form and for the life of any grant awarded to you to administer and analyse grants and for our own research. We may give copies of this information to individuals and organisations we consult when assessing applications, when monitoring grants and evaluating the way our funding programmes work and the impact they have. We may also share information with our auditors, other organisations that provide match funding and those with a legitimate interest in CHIP Fund applications and grants or for the prevention or detection of fraud.

16. Bank/Building Society Details

Name of bank:	Sort code:
Address:	Account no:
Account name:	

Declaration

Name: Position held: Organisation: Address: Tel: To the best of my knowledge, all the information provided is correct. Signed: Dated:
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Please complete and return with your application form