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| Please read the guidelines before completing this form | **Ventient Glenkerie Community Fund Micro-Grants Scheme** |
|  | Micro-Grants Application Form  (Up to £500 for groups or £250 for individuals) |

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| **All sections must be completed and form must be returned to Biggar Community Council.**  **Neil Ingram, 2 Covenanters’ Way, Biggar ML12 6ZD or email biggarcc@gmail.com** |

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| Section 1: Contact details | | | | |
| Name of Group or Individual applying? | |  | | |
| Contact name (for groups) | |  | | |
| Website (for groups) | |  | | |
| Email address | |  | | |
| Telephone | |  | | |
| Correspondence address (including postcode) | |  | | |
| Organisation address  (if different from above) | |  | | |
|  | |  | | |
| Section 2: About your organisation (Individuals do not need to complete this section) | | | | |
| When was your group established? |  | | | |
| Do you have a signed constitution? |  | | | |
| Are you a registered charity? If yes, please provide charity number. |  | | | |
| Financial Information – NOTE this should be supported by a copy of your organisations most up to date approved accounts. | **Total income last accounting year?**  **(New groups: projected income in first year)** | | **Total +Surplus or -Deficit**  **last accounting year?** | **Current unrestricted reserves (**refer to guidance notes**)** | |
|  | £ | | Surplus £  Deficit £  Delete as appropriate | £ | |

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| Section 3: Grant application | | | |
| Details of Micro-Grant Requested:  Please provide details of your project – what activities will you carry out? |  | | |
| How will this project benefit the community? |  | | |
| About your project | How much are you applying to the Fund for? (Up to £500 for groups or £250 for individuals.) | How much does your project cost? | When will the project take place’? | |
|  | £ | £ | Date: | |
| Will you be contributing any of your own funds to the projects or undertaking local fundraising to help meet the costs? Please explain |  | | | |
| How many people will benefit? |  | | | |
| What will happen if we can’t award you this grant? |  | | | |

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| Declaration  I certify that the information contained in this application is correct, and that I am authorised to make the application on behalf of the above group / individual.  Please tick this box to confirm that you have not already ordered, been invoiced for, or paid for items covered by this grant. We cannot award microgrants retrospectively for expenses which have already been incurred.  Please tick this box to acknowledge that receipts for expenditure must be provided to BCC, if requested.  Please tick this box to acknowledge that if your application is successful BCC may use your approved grant/project as an example in future BCC Newsletters or in BCC promotions (we will not share your contact details).  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please send your completed application to Biggar Community Council. Contact details are at the top of this form. |