

Dinnington St. John's Town Council (Application Form for Grants)

1. Name of Group/Organisation:
2. Address of Organisation:
3. Contact Details:
2. Aims and Objectives of Group/Organisation:
3. How long has your Group/Organisation been running?
4. Does your Group/Organisation have a constitution (set of rules) and an Equal Opportunities Policy? If so, please enclose with this application.

Constitution: YES/NO*

Equal Opportunities Policy: YES/NO*

** Please delete as appropriate*

5. Tell us how much money you need for the project and give us a breakdown of what the money is for.

Item/Activity	Cost £
(a)	
(b)	
(c)	
(d)	
(e)	
TOTAL COST	£

6. How many people will benefit from the Grant if approved? 25
7. Do you agree to submit to monitoring if requested? YES/NO* ** Please delete as appropriate*
8. Does your group/organisation have a Bank Account? YES / NO ** Please delete as appropriate*

If YES, please provide either (a) Copy of Annual Accounts, or (B) Last 3 months Bank Statements and submit along with this application.

If your grant is successful, we will also need your Bank Account details in order to pay you direct. Please provide us the following details:-

A/c No.:

Sort Code:

When complete, please return this form to: -

Town Clerk and Finance Officer
Dinnington St John's Town Council
Lyric Theatre
Laughton Road, Dinnington
Sheffield S25 2PS