

Grant Application Form - Individual Grants

1. APPLICANT’S DETAILS

Full names ...........................................................................................................................

Age Range: 0-10 | 11-18 | 19-25 | 25 +

 *(Please complete section 6 if applicant is under 18)*

Address ............................................................................................................................

 ............................................................................................................................

 .............................................................................................................................

Email ………………………………………………….

Telephone …………………………………….

1. FUNDING INFORMATION

Amount requested: £ ………………………………………

Total cost of activity: £……………………………………..

Have you received any grants from other sources to help fund the activity? YES / NO (please circle)

Do you intend to apply to other sources to help fund the activity? YES / NO (please circle)

If you have circled yes on either of the above questions, please provide further information below.

1. PROPOSED ACTIVITY

Please explain what the grant will be used for.

1. Please explain why you need a financial grant and why it would be difficult for you to do this activity without such support. Please add additional sheets if required, and enclose any supporting documents.
2. CONFIDENTIAL STATEMENT OF FINANCIAL CIRCUMSTANCES

Please state your household’s income before tax: £[  ]

*Please see notes for guidance: household income should include salaries, profits of owned businesses, pension/retired pay, investment income, tax credits, child benefit and any other allowances.*

Please state your household’s approximate disposable income: £[  ]

*Please see notes for guidance: deduct income tax, mortgage payments, rent, other loan repayments or credit card payments, maintenance payments, utility bills, travel expenses, food and living expenses etc.*

Please state the approximate value of your capital assets: £[  ]

*Please see notes for guidance: this should include the value of your house (if you own it), cars, cash, investments and other valuable assets. You should deduct the amount of any mortgage, debts or other loans which are outstanding.*

1. PARENT/GUARDIAN DETAILS (if applicant is under 18 and/or in full time education)

 Parent/Guardian 1 Parent/Guardian 2

Parents’ Names ................................................|...............................................................

Address ................................................|...............................................................

(if different from applicant’s) ................................................|...............................................................

...................................................|....................................................................

Occupation ................................................|...............................................................

Please list all other dependants (if necessary, continue on a separate sheet)

Name Age (if under 18) Name of school or college (*or dependency)*

1. .................................. | ........................... | ..................................................................

2. .................................. | ........................... | ..................................................................

3. .................................. | ........................... | ...................................................................

4. .................................. | ........................... | ...................................................................

5. .................................. | ........................... | ...................................................................

1. **DECLARATION**

I confirm that I have made a complete statement of my financial situation and circumstances generally and that the above information is correct to the best of my knowledge.

I understand that the Grant Application Committee may contact me for further information to assist the Board of Trustees in making a decision.

I understand that, if this application is successful, any grant provided by The Christine Best Foundation is made on the condition that it is used for the reasons cited in section 3 above; and I undertake to provide evidence that, should my application for a grant be successful, the grant has been used for the purpose for which it was intended.

I undertake to inform The Christine Best Foundation of any material change in my financial position prior to the Trustees making a decision regarding my application.

**Signature of applicant (if over 18) ............................................... Date..................**

**Signature of parent ............................................... Date………….......**

**All information received will be treated with the strictest confidence and will not be shared with any third parties.**