

53 The Street Uley Dursley Gloucestershire GL11 5SL Tel 01453 861592

Email <u>enquiries@uleycommunitystores.co.uk</u> www.uleycommunitystores.co.uk

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Grant application form 2024

Name of organisation Registered charity number Registered address Website (if available) **Bank details** Account name Account number Sort code Main representative contact details Title First name Surname Position held in organisation Contact address (if different from above address) Daytime phone number Email address **Declaration** I wish to submit an application for a Uley Community Spirit Grant on behalf of the above named organisation and I have the consent of the organisation's trustees/management committee I have read and understood the application guidelines I agree to provide a receipt for funds received and report on our project, event or installation of equipment I agree to take part in publicity activity in collaboration with Uley Community Stores Signature Date If you are applying for more than £250 please provide a second signature from an authorised member of your organisation. Signature

Date

What are the main objectives of your organisation?
Describe how you have identified a need for this grant
What are the honefits to the residents of Hley and Owlner?
What are the benefits to the residents of Uley and Owlpen? Please include information such as which residents will benefit most (by age, interest, location etc), how enduring
the benefit is, whether the grant is for recreation, educational or other facilities, projects or events.
How did you hear about Uley Community Spirit?
Word of mouth UCS website UCS Facebook Uley Village News Other
How much are you applying for?
£
If more than £250 please complete the rest of this form and include the requested supporting information with your
application.
If the amount you are applying for only meets a portion of your needs, how are you funding the remainder? Please provide details of other applications you have made and whether funding has been approved.

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Please provide a breakdown of your costs for this project or equipment Type of cost **Total amount Amount from UCS** From elsewhere (name likely source) Staff costs Volunteer expenses Operation/activity costs Overheads/premises Capital items (eg. computers, furniture) Publicity Other Total £ £ When will your project end? ____ / ____ When will your project start? ____ / ____ How will you gauge success of your project or equipment? Please include with your application • A copy of your last year's audited accounts A list of names and addresses of your trustees/management committee • A copy of your child protection policy (where applicable) The deadline for entries is 12 noon, Wednesday 31st January 2024. Applicants will be contacted during February Please submit your completed application form and supporting information in a sealed envelope and deliver to: The Treasurer **Uley Community Stores** 53 The Street Uley Dursley Gloucestershire GL11 5SL All information will be treated with strict confidentiality and viewed only by members of the UCS Management Committee. If you have any queries, please contact David Thomas: treasurer@uleycommunitystores.co.uk For UCS use only Committee meeting date _____ / ____ Approve fully/partially £ Decline (reason)

Report submitted _____ / ____

Payment made _____ / ___ Receipt submitted _____ / ____