# Step 1

Contact Details

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Organisation/Group\* |  | Mailing Address (including Postcode)\* |  |
| Name\* |  | Position\* |  |
| Daytime Telephone No\* |  | Email\* |  |
| Website (if relevant) |  |

Second Contact

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Position |  |
| Daytime Telephone No |  | Email |  |
| Website (if relevant) |  |

# Step 2

About your Organisation

|  |  |  |  |
| --- | --- | --- | --- |
| Geographical Area your work is focused on\* |  | Which of the following best describes your organization? (delete if not relevant) | Registered Charity (insert charity ID)Applying for charitable statusVoluntary OrganisationParish/Town CouncilOther (please specify) |
| What are the main activities of your organization? |  | How many people use your organisation? |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Does your organisation have a consultation? |  | How many people are on the management committee? |  |
| How many full-time paid staff do you have? |  | How many part-time staff do you have? |  |
| How many volunteers and informal helpers? |  |

# Step 3

About your project

|  |  |  |  |
| --- | --- | --- | --- |
| Describe the project you are requesting funding for\* |  | Does the project you are requesting funding for have a clear start and end date? If so, please provide them |  |
| Do you have any partner/community groups involved and if so, what will they do? |  |

# Step 4

Community Benefit

|  |  |
| --- | --- |
| Why is this project needed?Have you any evidence of this through consultation?(please include details of any research you have carried out – e.g., surveys/questionnaires and please attach along with application) |  |
| What tangible outcomes will your project achieve?\*How do you plan to monitor them? |  |
| What are your projects milestones and timescales?\* |  |

# Step 5

The cost of your project

|  |  |
| --- | --- |
| Are you registered for VAT?\* |  |

Please attach a document detailing the following:

* Breakdown of costs
* What funding you have already secured for your project
* What funding are you applying for
* If you have applied for funding from anywhere else and been refused
* Summary of funding
* Bank account details:
* Who should cheques be made payable to?
* Bank/Building society name
* Bank/Building society address
* Sort Code
* Account Number

|  |  |
| --- | --- |
| What steps will you take to overcome any shortfall above?\* |  |

# Step 6

Declaration

I am authorised to make the application on behalf of the above organisation

I certify that the information in this application is correct

If the information in the application changes in any way, I will inform LACPL

I understand that the information given in this form will be made available upon request to members of the public and/or organisation

I agree to participate in monitoring, auditing and reporting feedback related to these funds

I agree to acknowledge any funding received from LACPL and I agree to participate in promotion and PR related activities

I understand that successful applications are likely to be subject to various conditions and/or certain requirements

I acknowledge that all applications will need to be considered against the LACF policies made available on the website.

I certify that in the case of an individual, the applicant has no relationship with GLP Europe. In the case of an entity, the applicant has no direct or indirect relationship with any customer, contractor or investor associated with GLP Europe

First Contact

|  |  |
| --- | --- |
| Name\* |  |
| Date\* |  |
| Position Held\* |  |

Please email the completed application form and any supporting documents to the following email addresses: amy.young@glp.com  rosborn@excellolaw.co.uk. Thank you.