



Application for donation

Please return the completed form to:

Chelsea Building Society Charitable Foundation, Thirlestaine Hall, Thirlestaine Road, Cheltenham, Gloucestershire GL53 7AL

Registered charity number* <small>*or Inland Revenue tax exemption reference number/Registry of Friendly Societies number</small>	<input type="text"/>	Date established	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name of charity	<input type="text"/>		
Contact address	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Name of contact	<input type="text"/>	Title	<input type="text"/>
Position	<input type="text"/>		
Daytime telephone number (and best time to contact)	<input type="text"/>	Mobile number	<input type="text"/>
Email	<input type="text"/>	Website	<input type="text"/>

1 Background to charity

a What is your charity set up to do?

b Where do you work? (geographical area)

c What is the structure of your organisation, including number of trustees/management committee members, management team, other employees and volunteers?

Trustees/managment Committee members Part time staff Full time staff Volunteers

2 Current activities

a What are your current activities?

b Who benefits from your service?

c How many people benefit every year?

3 What do you want funding for?

Please give details of the project or part of your work for which you are applying for funds (including geographical location). If you are applying for support towards a salaried post please include a job description.

4 How much funding do you require?

£

5 What will this be used for?

Please provide a breakdown of how you intend to spend the grant – continue on a separate page if necessary.

Note: questions 6, 7, 8 and 9 should only be completed if the intention is for the project or service to be partially funded by the Charitable Foundation and if additional funding will be obtained from other sources (eg if the request is for the Charitable Foundation to fund between £250 and £5,000 towards a salary or to fund a large project).

6 What is the overall cost of the project or service for which funding is sought?

If this is part of a larger project/service £

7 Give a breakdown of total costs

8 How much have you already raised towards this project or service?

Indicate how much you have raised so far towards the total needed, and from what sources.

9 What is the balance needed?

Indicate how you are intending to raise the remaining balance and from what sources. If known, indicate when funding decision will be made.

Funder

Decision date

Amount

D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y

£	
£	
£	
£	

10

When are you planning to start the work?

D	D	M	M	Y	Y	Y	Y
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11 What do you want to achieve as a result of the funding?

We may ask successful applicants to complete a feedback form within a year of the grant being awarded.

12 Further information

Please list and forward to us, any relevant additional information telling us about your organisation which you feel may be helpful, together with a copy of your signed financial report and accounts.

Where did you hear about the Charitable Foundation?

13 Previous support

Please give details of any previous support received from Chelsea Building Society or the Chelsea Building Society Charitable Foundation.

14 Accounts

Please ensure that you have enclosed a copy of your most recent annual report and accounts (or draft accounts made up to a date no more than 18 months from the date of the next Trustees meeting). These should be signed as approved on behalf of the organisation's Management Committee or equivalent. Indicate here which financial year they relate to and please attach details of any significant changes in the financial position in the current year:

DDMMYYYY

If the relevant accounts are not available please indicate when they will be available and forward a copy to us.

DDMMYYYY

Checklist

To help speed the processing of your application for a donation, here is a checklist for your convenience. Remember to include the following information.

Before returning the application form, tick off the relevant items to ensure that all the required information is enclosed and return to us.

Application form

- Please complete carefully and ensure all parts of the application form are completed
- Ensure the application form is signed by two representatives of your organisation
- In question 1c please put a **figure** in the structure boxes, and not a tick
- Check your email address
- **Incomplete applications will be returned**

Tick

Enclosures

- Please provide us with a copy of your most recent **signed** audited accounts
- Please ensure you have enclosed a job description when you are applying for support towards a salaried post

Tick

Please remember, the above information will help with the processing of your application for donation.

We are unable to consider applications if support was provided in the last twelve months.

Unfortunately, we are unable to support every application we receive and the Trustees decision is final, we regret we are unable to give feedback on individual applications.

Should you require any help in the completion of this form or need clarification please do not hesitate in contacting us on 01242 271526.

Signatories

We require all applications to be signed by two representatives of the organisation. One of the signatories must be a trustee or a representative of senior management and should not be the same person as the named contact.

First signatory

Second signatory

Name

Name

Position

Position

For office use only