|  |
| --- |
| **THE HADFIELD TRUST**Registered Charity Number 1067491**APPLICATION FORM** |
| **NAME OF ORGANISATION** |  |
| **CORRESPONDENT** |  |
| **ADDRESS** |  |
| **TELEPHONE NUMBERS**  | **DAY: NIGHT:**  |
| **EMAIL ADDRESS**  |  |
| **CHARITY NUMBER****(If none please state)** |  | **If not a charity do you have a Constitution? YES/NO****(Please supply a copy)** |
| **BANK ACCOUNT TITLE** |  |
| **ACCOUNTS ENCLOSED**  | **YES** | **NO** |
| **PREVIOUS APPLICATION?**  | **NO** | **YES** | **DATE(S)**  | **AMOUNT(S)** |
| **NUMBER OF VOLUNTEERS (in Cumbria):** | **NUMBER OF BENEFICIARIES (in Cumbria)** | **NUMBER OF STAFF:****Total:****In Cumbria:**  |
| **HOW DID YOU BECOME AWARE OF THE HADFIELD TRUST?**  |
| **IN NO MORE THAN 100 WORDS PLEASE STATE CLEARLY THE PURPOSE FOR WHICH YOU ARE REQUESTING A GRANT.**  |
| **PLEASE TELL US ABOUT THE CHARITABLE AIMS OF YOUR ORGANISATION INCLUDING WHO ARE YOUR CUMBRIAN BENEFICIARIES** |
| **PLEASE TELL US HOW A GRANT, IF AWARDED, WILL MEET THE HADFIELD TRUST’S PRIORITIES?** |

|  |  |
| --- | --- |
| **THE AMOUNT OF MONEY REQUESTED?** |  |
| **HOW MUCH WILLTHIS PROJECT COST?**List principal capital items if applicable |  |
| **WHAT SUM HAS BEEN RAISED SO FAR?** |  |
| **FROM WHERE?** |  |
| **WHAT IS THE SHORTFALL? (this is Project Cost less Sum raised so far)** |  |
| **FOR THOSE WORKING WITH CHILDREN, YOUNG PEOPLE, A WRITTEN CHILD PROTECTON POLICY MUST BE IN PLACE AND REVIEWED ANNUALLY. PLEASE CONFIRM THE DATE ON WHICH THIS WAS LAST REVIEWED:****FOR THOSE WORKING WITH VULNERABLE ADULTS DO YOU HAVE A WRITTEN POLICY AND IF SO WHEN WAS THIS POLICY LAST REVIEWED?** |
| **PLEASE LIST ALL OTHER FUNDERS TO WHOM YOU HAVE APPLIED FOR THIS PROJECT:**  |
| **HOW WILL YOU EVALUATE THE WORK FOR WHICH YOU ARE APPLYING FOR FUNDING?** |
| **PLEASE SUPPLY THE NAME AND CONTACT DETAILS OF AN INDEPENDENT REFEREE WHO LIVES IN CUMBRIA AND KNOWS OF THE WORK YOUR ORGANISATION DOES IN THE COUNTY.** |

 NOTES TO APPLICANTS:

Please make sure you have included copies of all the documents needed to support your application:

your most recent annual accounts and bank statement (from all of your accounts); project costings and a minimum of 2 quotes for capital items plus a copy of your constitution if not a charity.

Please send either by email to: **admin@hadfieldtrust.org.uk**Or via post (after checking that you have attached the correct postage to ) **Ms Susan Berriman, Shoestone Cottage, Garnett Bridge, Kendal, Cumbria LA8 9AZ
Tel: 01539 823 112**