**Walter Farthing Trust**

**Application for Grant Funding**

**Introduction**

The Walter Farthing Trust awards small grants, typically up to £5,000, to support local charitable or not-for-profit organisations which benefit people in the Mid-Essex area.

All applications for Grant Funding will be considered in the light of others received and available resources. To ensure the Grant Panel can assess your application fairly please ensure you complete the application form accurately.

**Composition of the Grant Panel**

The panel will consist of not less than four members of the Trustees of the Walter Farthing Trust. Supplementary members may be co-opted as necessary. The decision-making body will be the Grant Panel from which there will be no right of appeal.

**Timeframe**

Routine applications will be considered by the Grant Panel twice a year. Routine applications must be submitted by email to apply@walterfarthing.co.uk by the following time and date:

 a. 1700 hours on 31 January

 b. 1700 hours on 31 July

Late applications will not be considered and will be rejected.

Emergency funding applications can be submitted by email to apply@walterfarthing.co.uk at any time and will be considered as soon as practically possible.

**Notification**

All routine applications will be informed of the Grant Panel decision within 1 month of the closing date. Emergency funding applications will be notified within two weeks of submission.

**Walter Farthing Trust**

**Application for Grant**

***(Please Note: The boxes will expand, as required, as you input text)***

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| **1. ORGANISATION INFORMATION** |
| Name of Organisation |  |
| Purpose of Organisation |  |
| Whom do you seek to help? |  |
| Status (e.g. charity, not-for-profit organisation) |  | Charity Registration Number (if applicable) |
| Address |  |
| Telephone |  |
| Email |  |
| Website |  |
| Contact Person |  |
| Title |  |
| Chair (if different from contact) |  |

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| 2. **FINANCIAL DETAILS** |
| Dates of financial year: |  |
| Income: |  |
| Expenditure: |  |
| Surplus/deficit: |  |
| Restricted Funds: |  |
| Unrestricted Funds: |  |
| Bank details: | Bank: | Sort code | Account No: |
| Any other comments: |  |

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| 3. **GRANT INFORMATION** |
| Amount Requested | £ | Date required: |  |
| Type of Request: |
| General Operating Support (finance for bills, maintenance etc.) | YES / NO |
| Capital Expense (i.e. the purchase of major items, office equipment, renovations) | YES / NO |
| Support for on-going project | YES / NO |
| Emergency funding (meet immediate financial need) | YES / NO |
| Other | YES / NO |

**PURPOSE OF GRANT**

*Please give details of specific objectives relating to this application. In particular, how will the grant benefit people in the Mid-Essex area.*

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|  |

Signed for and on behalf of (Insert name of charity or organisation)

……………………………………………………….…

Chair

Print Name:……………………………………………

Date:……………………………………………………

**Please return your completed application form to**

**apply@walterfarthing.co.uk**