Reference Number:

If you have any questions or would like some assistance in completing this form, please contact us.

|  |  |  |  |
| --- | --- | --- | --- |
| **Please tick the following to indicate the charitable purpose/s you are seeking funding for** | | | |
| The Advancement of Education |  | The Advancement of the Arts |  |
| The Advancement of Amateur Sport |  | The Advancement of Environmental Protection and Improvement |  |
| Health – Preserve & Protect e.g. respite |  | Health – Treatment & Care e.g. rehabilitation |  |
| Financial Hardship |  | Age Related  (Young/Elderly) |  |

Your Name: Date:

Your Address:

Your Contact Information:

Your Role in the Organisation/Event:

Name of the Organisation/Event/Project: Date of Event

(if relevant):

Registered charity/business number (if applicable):

Details of the Organisation/Event website and social media:

Total Cost of the Project/Event: Amount Request from the PFC Trust:

|  |
| --- |
| **Please give a brief description of what your organisation does (its purpose), (ONLY THE FIRST 300 WORDS WILL BE ACCEPTED)** |
|  |
| **Please give a brief description of your project/event, and include which areas of the public, and how many, may benefit from it (ONLY THE FIRST 400 WORDS WILL BE ACCEPTED)** |
|  |
| **Please provide a breakdown of how you intend to use the requested funding. If funding is for core operational costs or overheads, please include the amount/s** |
|  |
| **Please give details of other sources of funding and amounts being provided, including those applied for and any Business Grants** |
|  |
| **Please give names and websites of any other organisations that provide the same or similar service/s that you are requesting funds for:** |
|  |
| **If you have applied with us before, please let us know the amount, date and reason for the funding.** |
|  |

**Does your organisation have adequate insurance in place to enable the event/project to be carried out in a safe and competent manner (this includes having insurance in place to cover the health and safety of anyone involved in the project)? Please tick to confirm:**

Please provide the following supporting information:

1. Photo ID for yourself.
2. Evidence of Safeguarding practices.
3. The last 3 years of accounts (or a current bank statement if accounts are not available)

**Please do not submit the application without the supporting information as we cannot accept it.**

If you have any problems with providing any of the information, please contact us to discuss before submitting your application.

If you are applying for more than £5,000, please also attached additional information to support your application, for example: Business plan/s, testimonies, case studies.

|  |  |
| --- | --- |
| **Agreement** | |
| **By signing this agreement, you confirm that you, and your organisation, agree to all the terms, principles and application process as detailed in the PFC Trust Grant Making Policy** | |
| Signature: |  |

**You are requested not to share any information contained on this form without consent of THE PFC Trust. Thank you.**