#

# **HASSOCKS PARISH COUNCIL**

**GRANT APPLICATION 2024/25**

# **CONTACT DETAILS**

Name of Group/Organisation:

Address:

Post Code:

Email:

Tel No:

Contact Person

Title: First Name:

Surname: Position held in Group:

Email: Telephone No:

***ABOUT YOUR ORGANISATION***

What type of organisation are you? Please tick all the boxes that apply:

Community group/club/society  Company Limited by Guarantee/CIC 

Registered Charity  Other 

If other, please describe:

Charity Registration Number

Purpose of your community group/organisation and how are you financed?

Please enclose a copy of your constitution. If you are not a registered charity you **must** enclose a copy of your constitution.

If you are a branch of, or related to, a larger organisation, please give details:

***ABOUT YOUR PROJECT/SERVICE***

**Project Title.**

**Briefly describe your project to enable the Parish Council to understand how its grant will be used:**

**How many people from the parish of Hassocks will directly benefit from your project?**

**Have you received grant funding from Hassocks Parish Council in the past three years?** If so could you please give details of how much funding you have a received (broken down annually).

**Please provide a summary breakdown of what the money will be used for.** We need this information to fully assess your application. If you have a project budget or have received estimates/quotations please enclose copies:

|  |  |
| --- | --- |
| **Item/Activity** | **Estimated Cost** |
|  |  |

**Please provide a summary of funding sought from other sources if applicable.**

|  |  |
| --- | --- |
| **Funding source** | **Estimated Grant** |
|  |  |

How much of the organisation’s own money will be used towards funding this project?

£\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How much funding are you seeking from the Parish Council?

£\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your total project expenditure include or exclude VAT?

## FINANCIAL DETAILS

You must include an up to date statement of your group’s financial position (a copy of the latest accounts or a treasurer’s report). If you are holding substantial reserves which would cover the cost of delivering the project you are seeking grant funding for you must provide an explanation as to why this project cannot be supported from your own funds.

***DECLARATION***

I am/ we are authorised to submit this application on behalf of the Group/organisation and certify that the information enclosed is correct. We understand that there is no appeal procedure should this application be rejected. If Hassocks Parish Council gives a grant, we agree to use it only for the purpose given and according to any conditions specified. We understand that within twelve months after payment of a grant, we are expected to provide Hassocks Parish Council with a report/evidence on the progress of this project and how the money has been spent.

Signature Date:

(Please: Print name)

Position held:

If a grant is awarded, please state who the cheque should be made payable to:

***CHECKLIST***

It is essential that you fill in every question and send the appropriate supporting documentation. Complete the following checklist to show what you have done. If you do not include all the information requested, your application will be incomplete and will take longer to assess or be ineligible. Please do not send any documentation other than that requested.

|  |  |
| --- | --- |
| **I have:**(Please tick) |  answered every question enclosed a copy of our latest accounts and/or treasurer’s statement Signed the Declaration  |

GRANT REQUESTS

ALL APPLICATIONS FOR FINANCIAL ASSISTANCE ARE CONSIDERED ON THEIR INDIVIDUAL MERITS. APPLICATIONS MUST BE SUBMITTED WELL IN ADVANCE OF YOUR PROJECT TAKING PLACE IN ORDER TO BE CONSIDERED AT THE APPROPRIATE MEETING

**Completed Application Forms should be returned to:**

The Parish Clerk, Parish Centre, Adastra Park, Keymer Road, Hassocks BN6 8QH

Tel: 01273 842714 email: [info@hassocks-pc.gov.uk](file:///C%3A%5CUsers%5Cclerk%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5CHV5TFBKY%5Cinfo%40hassocks-pc.gov.uk)

Hassocks Parish Council will consider funding applications in 2020/21 at the following Full Council meetings. All applications must be submitted at least two weeks prior to the relevant meeting. No grant funding will be given retrospectively:

|  |  |
| --- | --- |
| **Date of meeting** | **Application receipt deadline** |
| **September 2024** | **August 31st 2024** |
| **February 2025** | **January 31st 2025** |

**Privacy Notice for Grant Applicants**

Hassocks Parish is the Data Controller under the new data protection law and will use the information you provide on this form in order to contact you about your grant application.

If you are an organisation or a group the legal basis for processing this data is the necessity for compliance with a legal obligation to consider your grant request.

If you include any personal details on this grant request on behalf of an organisation or group, the legal basis for processing this data is your consent to do so. You can withdraw your consent at any time by notifying us. Our contact details to do so, or for any other queries, are Parish Centre, Adastra Park, Keymer Road, Hassocks, BN6 8QH.

We will keep your data for six years if your grant application is successful and for six months if your application is turned down plus the current financial year, which runs from 1st April to 31st March.

Your information will not be shared further.

Individuals have a number of rights under data protection law, including the right to request their information. You also have a right to make a complaint about our handling of your personal data to the Information Commissioner’s Office <https://ico.org.uk/>

Information you provide will only be used for the stated purpose. Further information about the processing of your data can be found on our website at [www.hassocks-pc.](http://www.hassocks-pc.)gov.uk

If you agree to Hassocks Parish Council using and retaining your personal information contained on the grant from above to consider your grant application please tick the boxes below:

Name: 

Address: 

Email: 

Phone: 

**DATE:**