

**APPLICATION FOR FINANCIAL ASSISTANCE FROM HARRY SKELLS CHARITY**

**PLEASE RETURN THIS FORM TO THE TOWN CLERK, TOWN HALL STAMFORD, ONE WEEK BEFORE THE NEXT MEETING WHICH IS TO BE HELD ON.....**

**YOU MAY BE ASKED TO ATTEND A MEETING OF THE TRUSTEES.**

**PLEASE NOTE THAT UNDER THE TERMS OF THE TRUST, GRANTS CAN ONLY BE MADE FOR STRUCTURAL, OR CLOSELY CONNECTED, WORK. GRANTS CAN NOT BE MADE FOR RUNNING EXPENSES OR VEHICLES.**

**IF APPROVED, GRANTS WILL ONLY BE PAID OUT UPON PRODUCTION OF EVIDENCE THAT THE WORK HAS BEEN DONE. THE TRUSTEES WILL ALSO SUPPLY A SMALL PLAQUE THAT THEY WILL EXPECT TO BE AFFIXED TO A BUILDING, TO SHOW THAT THE TRUST HAS ASSISTED WITH THE WORK.**

**1. NAME AND ADDRESS OF ORGANISATION** .....  
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**2. NAME, ADDRESS AND TELEPHONE NO. OF** A).....

**A) PERSON MAKING THE APPLICATION AND POSITION (E.G. CHAIRMAN)** .....

**B) PERSON WHO WILL ATTEND MEETING IF REQUESTED** B).....

**3. DETAILS OF ORGANISATION INCLUDING:** .....

**MEMBERSHIP NUMBERS** .....

**WHAT IT DOES** .....

**4. DETAILS OF GRANT REQUIRED INCLUDING:** .....

**FOR WHAT PURPOSE MONEY IS REQUIRED** .....

**HOW MUCH WILL IT COST** .....

**WHAT IS THE TOTAL GRANT REQUIRED FROM SKELLS CHARITY** .....

**GRANTS BEING REQUESTED FROM OTHER ORGANISATIONS** .....

**5. ANY OTHER COMMENTS YOU MAY WISH TO MAKE.....**

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**6. PLEASE ENCLOSE THE FOLLOWING WITH YOUR APPLICATION:**

**COPY OF YOUR ORGANISATION'S RULES**

**COPY OF YOUR LAST YEAR'S ACCOUNTS**

**TWO OR MORE ESTIMATES/QUOTES FOR THE RELEVANT EXPENDITURE.**

**SIGNED.....**

**DATE.....**