

St Olave's Foundation Fund

Grants for Schools/Youth Organisations

Determining Your Eligibility

(Please 'Enable' document before downloading/saving to your device if you are using Microsoft Word)

Before completing the next 4 pages, please answer <u>ALL</u> the questions below and then read the Guidance and Application notes on the Foundation Fund website: www.stolavesfoundationfund.co.uk

- 1. Have you read the Fund's Guidance Notes and Application Requirements? Yes/no
- 2. Will your project be based in the London Borough of Southwark? Yes/no
- 3. Are most of the participants under the age of 25 years old? Yes/no
- 4. Will everyone relevant from your organisation coming into contact with children be Yes/No DBS checked?
- 5. Are you able to agree to our Privacy and Data Protection Policy and other Terms and Conditions found on the Website? Yes/no

If you have answered 'No' to any of the above questions, you will not be eligible for a grant from The St Olave's Foundation Fund and should not complete the application form. Please contact the Foundation for further assistance.

If you have answered 'Yes' to all the above questions, please proceed to the grant application form below.

Data protection statement

Please note:

When you complete the grant application form you are expressly consenting to your personal data being held by us in accordance with our <u>Privacy and Data Protection Policy</u> to be found on our website. All data entered in the application will be held under the same Policy in accordance with the current General Data Protection Regulations.

St Olave's Foundation Fund



Grant Application for Schools/Youth Organisations

(Tab across the 'grey' areas and type in requested information)

Please answer ALL questions (boxes will expand automatically)

Name of School/Youth Organisation: Name of School or Youth Organisation

Summary of Grant Request	Amount Requested (£)
Brief note of items you are requesting	Amount in £

School/Youth Organisation Details:

Contact person and position: Contact person and position

Organisation Address: Address 1

Address 2 Address 3 Address 4 Post Code

Website address: Website Address

Charity Number (if applicable): Charity No. or N/A

Organisation's total income if over £25,000: Total income if over £25,000 or N/A

Total number of active members in the organisation: Total number of active members in your

organisation

Total number of paid staff: Number of paid staff

Total number of volunteers : Total number of volunteers

Percentage of children on Pupil Premium (if known): Percentage of children on Pupil Premium

Can you confirm you have a child/vulnerable person

protection policy in place (Safeguarding): Confirm child/vulnerable person protection policy

Can you confirm that everyone coming into contact with

children/vulnerable people will be DBS checked: All contact with children/vulnerable people will be DBS checked

Project Description

Number of under 25 yr olds living in Southwark

involved in this project: Number of under 25 yr olds involved in this project

Venue and whether reserved for this project: Venue and if reserved for this project

Expected start/finish date: start date to finish date

What are the aims and objectives of your organisation?:

Aims & Objectives of Organisation

What the funding will be used for ie. project description:

What the grant will be used for

Why the funding is essential to this project/activity:

Why is funding essential to project

How will you evaluate the goals achieved:

Evaluation of goals met

Breakdown of Requested Items:

Please give a cost breakdown for the project. Enter all major activities and their projected costs in £

Items

Detailed description of item(s) you wish to purchase

Cost (£)

Total:

Total

Contribution from each participant (if applicable): Contribution from each participant/N/A

Total amount from fundraising (if applicable): Total amount from fundraising/N/A

Other charities applied to or have been promised funding from: Other charities applied to or

have been promised funding from

Contributions from other charities (if applicable): Contributions from other charities

TOTAL grant you are applying for: Total grant you are applying for

Where did you hear about the St Olave's Foundation Fund : Details on where you heard about the Foundation Fund

For first time applicants only - Please name and give contact details of two local community or organisation:

Two names and contact details of local community/organisation

Leaders who support your work: leaders or N/A

Please confirm that all information given on this form is correct and current at the time of writing : Yes/No

Signature: Type Name **Date:** Today's Date

Please feel free to attach any relevant supporting information such as reports/photographs etc. when emailing your grant application to us.

Continued ...

St Olave's Foundation Fund

Additional information to be completed (Please answer ALL questions)

Name of School/Youth Organisation: Name of School/Youth Organisation

Full legal name of organisation if different from application form above: Full legal name or N/A

Correspondence Address if different from the

application form: Address 1 or N/A

Address 2 Address 3 Post Code

Please give your contact details: E-Mail Address

Landline telephone no.

Mobile number

Should your grant application be successful, we will require the following bank details:

The exact school/organisation name on the bank or building society account: Exact name on bank account

The name of the bank or building society: Name of bank

The sort code: Sort code

The account number: Account number

After completing **ALL** sections of the grant application process, please resave the document to your device and then email a copy (preferably in .docx format) along with your supporting documents to Grants@stolavesfoundation.co.uk within the deadline dates for the Foundation Fund's quarterly meetings (as stated on our website: http://www.stolavesfoundationfund.org.uk/). Your grant application will be acknowledged.

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