

# Foodbank Support Grant 2020



## Application Form to the Grant scheme Foodbank Support

If you are interested in applying and would like advice or an opportunity to discuss the suitability of your bid prior to application contact the Community Services Office – 01795 417193

The fund will be open from 20th January 2020 to 17th February 2020

Before completing this form please read the accompanying guidance information.

<b>Your Organisation:</b>	
<b>Applicant Name:</b>	
<b>Position:</b>	
<b>Treasurer Name:</b>	
<b>Full Postal Address:</b>	
<b>Postcode:</b>	
<b>E-mail:</b>	
<b>Telephone:</b>	
<b>Twitter Account Name:</b> e.g. @SwaleCouncil	

### What is the status of your group or organisation?

Unincorporated Association (Community Group)	<input type="checkbox"/>	Incorporated	<input type="checkbox"/>
Company Ltd by Guarantee	<input type="checkbox"/>	Registered Charity No	<input type="text"/>
Other (please explain below)	<input type="checkbox"/>	Social Enterprise	<input type="checkbox"/>

### Project or Activity

Briefly describe your project or activity - Including who will benefit and how your project will benefit Swale (please use an additional sheet if necessary):

Please describe how your project contributes to the objectives set out by Cabinet.

If you plan to work with partners please explain what arrangements you have already agreed for involving partners.

**Project Costs – Please detail below the total costs of your project.**

Item	Description	Amount
		£
		£
		£
		£
	<b>VAT</b>	£
<b>Total Project Expenditure</b>		£

Match Funding	Details	Amount
		£
		£
		£
		£
		£
<b>Total Project Match Funding</b>		£

Grant Request	£
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<b>Estimates and Quotations</b> Where projects costs are based on external estimates or quotes, please provide copies with this applications.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Office use:	
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

# Declaration:

**The grant award must only be spent on the project as outlined in this application form.**

I declare the information provided within this application is correct to the best of my knowledge and the grant will only be spent as outlined in my application and will comply with the Terms and Conditions detailed in the guidance notes.

I will ensure that monitoring information is provided at the end of the project and that the support provided by Swale Borough Council will be featured within any publicity for the project.

**I will ensure that I am compliant with all the necessary legislation (e.g. Health and Safety) and adhere to policies required for my organisation (policies are Equality & Diversity and Safeguarding if working/in contact with vulnerable adults and children). Terms & conditions have been read in the grant guidance notes.**

Name: ..... Position: .....

Signature: ..... Date: .....

Please tick here if you would like to receive any updates on funding opportunities, advertising or events that Swale Borough Council wishes to promote.

Applications can either be emailed to **communitygrants@swale.gov.uk** or sent for the attention of the ECS Coordinator, at Swale Borough Council, Swale House, East Street, Sittingbourne, Kent ME10 3HT

For additional information and support please contact Sue Maidens at Swale Borough Council, on **suemaidens@swale.gov.uk** , Tel: **01795 417193**.

*If you would like hard copies or alternative versions [i.e.] large print, audio, different languages we will do our best to accommodate your request, please contact Swale Borough Council or telephone the Customer Service Centre on 01795 417850.*

**All of the personal information provided by you will be kept in strictest confidence and will not be shared with anyone else.**

For office use only:

<b>Date Application Received Complete</b>	
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