

GRANT APPLICATION FORM GUIDANCE NOTES

Please read these notes carefully before completing the application form.

1. Objectives of the Charity:

- a) to advance the education of children and young people, with particular reference to those with hearing impairments.
- b) to support any other charitable object which promotes the welfare of hearing impaired children and young people, which may conveniently be pursued in conjunction with the pursuits of the above.

2. Types of requests and projects the Trust will consider:

- a) assistance with the purchase of specialist hearing equipment or other aids which will benefit an individual or organisation.
- b) the provision of funding for special courses or individual tuition or speech therapy.
- c) support for professional assessments and advice or support for appeals against local authorities.
- d) the financial support of another charity for hearing impaired.

Each application will be considered on its own merit.

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3. How to apply to the Birkdale Trust:

- a) Complete the <u>appropriate</u> application form for an individual or an organisation. A letter supporting the application is requested.
- b) If an applicant is under 18 the application form <u>must</u> be completed in full by the parent or guardian, with a supporting letter or other official papers.
- c) Requests for grants towards equipment or services <u>must</u> be supported by a written estimate(s) from the supplier or provider.
- d) All grants for equipment and services will be paid by cheque direct to the supplier or organisation, whenever this is possible. Receipts of completed purchases <u>must</u> be sent to the Secretary of the Birkdale Trust.
- e) An application form from a group, including a charity or an educational establishment, **must** be signed by two people authorised to sign for that organisation's bank account.
- f) Please note that the submission of an application does not guarantee that a grant will be made or that an accepted application will receive the full funding requested.
- g) Trustees welcome additional information in support of the application.

4. When grants will be allocated.

a) The Trustees meet six times per year to consider applications and all submissions will be considered at the first available meeting.

5. Final Requests

It is the responsibility of applicants to ensure that:

- a) The application is completed in full, including the tick list on page 7 of the form.
- b) Supporting material is included wherever necessary.
- c) A stamped addressed envelope is included for the Trust's reply.

It would help in dealing with the application if you only use one side of each page and if no staples are used.

Thank you.

Please note that;

- 1. No part of the Application Form is held on computer.
- 2. No part of the Application Form is passed to any third party.
- 3. All copies of the Application Form, distributed to the Trustees prior to the Trustees' meeting, are confidentially destroyed after the meeting.
- 4. The Master copy of the Application Forms are securely held for three years and are then confidentially destroyed.
- 5. It is implied that this form is submitted by you in order that the Trustees can consider whether we can agree to accept your claim.

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Grant Application Form – <u>from a Charity,</u> Educational Establishment or Group.

It is ir	mplied that this form is sub	mitted by you in order that the Trustees can consider whether we can
agree	e to accept your claim and	unless you tick this box, we are unable to accept your application
1.	Name of Organisation:	
2.	Name of Applicant:	
3.	Contact Address:	
4.	Daytime tel:	
5.	Evening tel:	
6.	Mobile tel:	
-	Farm	
7.	Fax:	
8.	E-mail Address:	
9.	Education Authority: (if applicable)	
10.	Charity Number: (if applicable)	

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	e provide full details o ow this will be used.					
•••						
	e enter the amount of graing Impaired Limited		ill ne	ed from	this	s charity, the Birkdale T
		u.				
	£					
าy	contribution being gi	ven by:				
Υ	our establishment:	Yes []	No []	Amount £
F	Parents or Guardian:	Yes []	No []	Amount £

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Please provide details of any previous applications you have made to this Charity. FAILURE TO DO SO MAY INVALIDATE YOUR REQUEST.

14.

Date	Grant Provided - £	Purpose of Grant		

Please provide any additional information that you feel supports your application,

Does your Group produce annual accounts?

16. Yes [] No []

If yes, please provide a copy of your latest accounts.

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Declaration

I /we confirm that the information in this application form is correct and that any grant awarded will be used for the sole purpose(s) stated, and in accordance with any conditions specified, and I/we understand that the Trust will not accept any liability in connection with any grant.

17.	Name 1:		<u>.</u>		
	Position 1:		·····-		
	Signature 1		·····•		
18.	Name 2:		<u>.</u>		
	Position 2:		<u>.</u>		
	Signature 2:		····· •		
19.	Date of Application:				
BEI	FORE SUBMITTING T	HIS APPLICATION PLEASE TICK THE FOLLOWING:			
1) Y	OU HAVE ENCLOSED WE	RITTEN QUOTATIONS THAT ARE RELEVANT TO YOUR APPLICATION	[]		
2) Y	YOU HAVE COMPLETED ALL QUESTIONS				
•		PRE-STAMPED SELF-ADDRESSED ENVELOPE, PROPRIATE POSTAGE IS AFFIXED.	[]		
•		YOUR APPLICATION IN A LARGE ENVELOPE, AT THE CORRECT POSTAGE IS AFFIXED.	[]		

N.B. WITHOUT THE RELEVANT INFORMATION AND DOCUMENTS, YOUR APPLICATION WILL NOT BE ACTIONED.

ALL COMPLETED APPLICATIONS SHOULD BE SENT TO: The Administrator, BTHI Ltd, 21 Gleneagles Drive, Ainsdale, Southport, PR8 3PP

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