

APPLICATION FOR APPLYING FOR WARD DISCRETIONARY FROM THE HIGHLAND COUNCIL – UNDER £1,000

Applicant organisation:					
Project title:					
Project location (inc. postcode):					
Contact name:					
Applicant Address (inc. postcode):					
Email address:					
Contact telephone:					
Council Ward: (check guidance for link)					
Does the main contact have any	communic	eation needs? E.g.	textphone, sign languag	ge, larg	e print?
Yes				No	
What type of organisation are you	? (Please tic	k all that apply)			
Third Sector (voluntary or community) organisation		Community Council			
Registered Charity		Company Limited by Guarantee			
If yes – Registration number		If yes - Comp	any Number		
Other - please specify	<u></u>				
Start date of project:					
End date of project:					
				,	
Project summary – please provide example:	a brief out	line of your project	and the outcomes it	t will d	eliver.
 Aims of the project and how you 	are going t	o do it			

- Help with running costs or for a specific project or activity?
- Who will benefit?
- How your project or activity will help the Council to meet its Public Sector Equality Duty

Please note that the Council will be unable to provide any resources not specified on this form or supporting information.						

Please provide a bre listing the ite	ect will cost, ing:	Amount (£)				
	Total	Project Cost				
Total Requested Amount						
How will the project applied to?)	be funded? (What other organisations have you	Amount (£)	Confirmed			
	Total Requested Funding					
	Total Match Funding					
	Total Project Costs					
Your Bank Details:						
Name of Bank:						
Account Name:						
Account Number:						
Sort Code:						

Checklist And Declaration - To ensure that the Highland Council can consider yn please tick boxes to show what you have enclosed. Please ensure that you have following information:						
Externally verified Statement of Accounts as presented to your latest AGM						
For new organisations which have been established less than 12 months, please give an estimate of first year's income and expenditure						
AND						
A copy of your organisation's last month's bank statements (for very new organisations a single bank statement will be sufficient)						
AND						
A copy of your organisation's constitution						
Declaration: We confirm that we are allowed to submit this application on behalf of:						
Name Of Organisation:						
We undertake to ensure that all the necessary enclosures are included, that the information is, to the best of our knowledge, accurate and that this application complies with the Highland Council's Conditions of Award. The data you have provided in the application and claim forms will be recorded on an electronic data base and are subject to the provisions of the Freedom of Information Act (Scotland) Act 2002, the Data Protection Act 1998.						
Please provide 2 signatures. Signatory 1 should be the Chairperson of the Organisation and signatory 2 should be the person who has filled out the form. If these two people are the same, signatory 2 should be another member of your organisation's committee.						
Signatory 1: Signatory 2:						
Print Name:						
Signature:						
Date:						
Please confirm you have read and understood the <u>Privacy Notice</u> : Yes ☐ No ☐ Please confirm you have read and understood the Funding Terms and Conditions:						
Yes □ No □						
Completed forms should be emailed to: Policy6@highland.gov.uk:						