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| **Community Donation Fund Application Form** |
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| **Q1 Name of Organisation applying:** ..........................................................................................................................................Company no. (if applicable): ........................... Charity no. *(if applicable):* ..........................*Please attach a copy of your Rules, Memorandum and Articles or another governing document.* |

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| **Q2 Contact Details of applicant**Name: ...........................................................................................................................Address: ...............................................................................................................................................................................................................................................................Post Code: ...................................... Contact No..: ..............................................Email: .....................................................................................................................  |

**Q3 What donation amount are you applying for? £\_\_\_\_\_**

**Q4 Do you have a Bank Account?** Yes/No

Are at least two signatures required for release of funds from your account? Yes/No

**Q5 Please tell us briefly what your organisation does?**

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**Q6 Please tell us what our funding would pay for?**

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**Q7 a) Who will your project benefit?**

*We don’t need names but we do need an idea of which group(s) of people will benefit – and how many?*

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**Q8 b) How will these people benefit?**

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**Q9 When are you planning to start your project?**

Month: .................................................................

Year: .....................................................................

**Authorisation:**

* We have read and agree to abide by the conditions set out in Rural Stirling Housing Association’s Community Donation Fund Policy.
* We understand and agree that the grant must be used for the intended purpose specified in our application – any changes must first be agreed by Rural Stirling Housing Association.
* We agree to identify and return any underspend to Rural Stirling Housing Association; we understand that if the costs incurred are higher, supplementary applications will not be considered.
* We confirm that this application has the support of our Committee and/or group as a whole.

**Main Contact** (this should be the same person as at Q2)

Signature: ................................................................................................

Please print name: ..................................................................................

Position in group: ....................................................................................

Date: ……………………….

**Second Contact** (Chair, Treasurer or Secretary who must be fully aware of this application)

Signature: ................................................................................................

Please print name: ...................................................................................

Position in group: .....................................................................................

Date: …………………….