



## Foundation Grant Scheme Application Form

Please read and ensure you understand the Foundation Grant Scheme terms and criteria before completing the application.

Please use **BLOCK CAPITALS** and answer all questions providing as much information as possible, referring to the guidance included with this form.

### Section 1 Contact Information

<b>Name and address</b>	Mr Alan Smith 123 Foundation Way, Wakefield, WF4 5TH
<b>Contact email</b>	asmith@testemail.com
<b>Contact number</b>	01924 234 567

### Section 2 Tell us what the funds are needed for

<b>Please explain what the Foundation Grant will be used for</b>
<p>The grant will be used to fund a Light Good Vehicle (LGV) course and license, as well as a Certificate of Professional Competence (CPC) course.</p> <p>I was recently made redundant and while looking for work I have discovered that a business in the local industrial estate are recruiting drivers. I visited the business and they told me they have been recruiting for a long time because so few people have the LGV license required. It turns out I meet all the criteria except that one, and as it's only a week course I could be back in work in no time, earning £14p/h.</p>

**Please provide an explanation of how and why you feel your proposal contributes to self improvement**

I have always worked for minimum wage and struggled to make ends meet for my family, meaning I didn't have any money for personal development. Being awarded a Foundation Grant would allow me to improve the situation for myself and my family, so we would no longer be reliant on benefits and would even have disposable income to enjoy life.

**If your project will be ongoing, how will it continue after the funding from this application has been used?**

The project isn't ongoing.

**Section 3 Costs**

<b>How much are you applying for?</b>	<b>£1,000</b>
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**Please provide a breakdown of all items of expenditure the grant would be used to pay for: (please provide an appendices of proof of all expenditure)**

<b>Item</b>	<b>Quantity</b>	<b>Amount applied for</b>
<b>LGV Course</b>	<b>1</b>	<b>£700</b>
<b>CPC Course</b>	<b>1</b>	<b>£300</b>
		<b>£</b>
		<b>£</b>

<b>Is the total cost of the project greater than the amount applied for from the grant?</b>		<b>No</b>
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**If yes, please state how you will make up the shortfall including details of any other applications for funding you have made**

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<b>Have you received any grants / donations from WDH in the last three years</b>		<b>No</b>
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<b>If yes, please state the date and amount</b>	
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## Section 4 Declarations

<b>To the best of your knowledge, are you or a close relation, a WDH officer, Board member or employee?</b>
<b>If so, please provide details of the relationship</b>
No

<b>Data Protection Statement</b>
<p>The information requested on this form is required by WDH in order to assess the grant application.</p> <p>By submitting this application you are consenting to WDH to share appropriate information on this application with WDH employees and panel members. This information may be used for publicity purposes should the grant be awarded.</p>

<b>Signatures authorising this application</b>
<p>I have read and understood the terms and criteria of the WDH Foundation Grant Scheme.</p> <p>I declare that all the information given is true and I understand that if any funds are not used for the purpose outlined in this application then they are liable to be recovered by WDH.</p> <p>If equipment has been purchased with this grant, any such equipment remaining will be distributed within the community at the discretion of WDH.</p>

<b>Signature</b>	
Name (please print)	A Smith
Signature	
Date	04.02.2019

## Section 5

How did you hear about WDH's Foundation Grant Scheme
Through WDH on Facebook

## Section 6 Evidence

Please tick the boxes below to confirm you have included all the required supporting documentation. Failure to do so will delay your application.	
Details supporting the documentation required (please refer to the 'Guide for Applicants' for further details).	please tick
Three quotations (where appropriate) and any supporting evidence.	<input checked="" type="checkbox"/>
Contact details for the training provider or supplier.	<input checked="" type="checkbox"/>
Two forms of identification.	<input checked="" type="checkbox"/>

# Equal Opportunities Monitoring

Date of birth:

Gender:  Male  Female

### White

- British
- Irish
- Any other White background

### Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

### Chinese

- Chinese

### Sexual Orientation

- Bi-sexual
- Heterosexual/straight

### Religion

- Buddhist
- Jewish
- Rastafarian

### Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background

### Black or Black British

- Caribbean
- African
- Any other Black background

### Any other ethnic group (please specify)

- Gay man
- Gay woman/lesbian
- Other
- Prefer not to say

- Christian
- Muslim
- Sikh
- Hindu
- No religion
- Other



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