



Foundation Grant Scheme Application Form

Please read and make sure 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

Name and address	
Contact email	
Contact number	

Section 2 Tell us what the funds are needed for

Please explain what the Foundation Grant will be used for

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

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

Section 3 Costs

How much are you applying for?

£

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)

Item	Quantity	Amount applied for
		£
		£
		£
		£

Is the total cost of the project greater than the amount applied for from the grant?

Yes

No

If yes, please state how you will make up the shortfall including details of any other applications for funding you have made

Have you received any grants / donations from WDH in the last three years

Yes

No

If yes, please state the date and amount

Section 4 Declarations

To the best of your knowledge, are you or a close relation, a WDH officer, Board member or employee?

If so, please provide details of the relationship

Data Protection Statement

The information requested on this form is required by WDH in order to assess the grant application.

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.

Signatures authorising this application

I have read and understood the terms and criteria of the WDH Foundation Grant Scheme.

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.

If equipment has been purchased with this grant, any such equipment remaining will be distributed within the community at the discretion of WDH.

Signature	
Name (please print)	
Signature	
Date	

Section 5

How did you hear about WDH's Foundation Grant Scheme

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 of supporting documentation required (please refer to 'Guide for Applicants' for further details).	please tick
Three quotations (where appropriate) and any supporting evidence.	<input type="checkbox"/>
Contact details for the training provider or supplier	<input type="checkbox"/>
Two forms of identification	<input 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

- Gay man
 Other

- Gay woman/lesbian
 Prefer not to say

Religion

- Buddhist
 Jewish
 Rastafarian

- Christian
 Muslim
 Sikh

- Hindu
 No religion
 Other

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)

