## **Poulshot Community Fund**

## **APPLICATION FORM**

Please complete this form in black ink as clearly as possible and read the accompanying guidance notes to help complete the form.

SUBJECT OF PROJECT :			
APPLICANTS CONTACT DETAILS:			
Name:			
Address:			
Email address:			
Landline number:	Mobile number:		

PROJECT:
Description:  Describe your proposal in full, giving timescales, locations etc.
Management:  If the project is approved describe how it will be handled (i.e. who will manage it, and what your involvement would be).
Costs:  Give estimates of cost (including VAT etc. and also any ongoing costs). Please attach evidence of these costs.

Benefits:				
In your opinion what are the long-term benefits to the Community? Please give your reasons as to how you believe residents of Poulshot may benefit.				
A Of D file				
Area Of Benefit: Which of the following categories does the project	benefit			
☐ Older People	☐ Young People	☐ Arts & Culture		
☐ Sports & Recreation	☐ Highways & Transport	☐ Enhancing The Environment		
☐ Charitable Support & Advice	☐ Village Facilities & Amenities			
Additional Information:				
If there is any other information which you conside	er to be relevant to your application, please provide	details below or on a separate sheet.		

<b>DECLARATION:</b> If the person submitting this application is under 18 then the form must be countersigned by an adult.				
Signed:	Date:			
Please send, or deliver, the complete as possible to the Chairman of the P	d application form (with all supporting documers) arish Council.	entation) as soon		
Please note that this application form will be will be open to the public.				
If you have any queries, please contact the Parish Council via the Parish Clerk.				
You are advised to keep a copy of this application for your own records.				
For internal admin use only:				
Date application received:				
Application reference no:				
Decision date:	Decision:			
Date applicant notified of outcome:				