**MKCC - Coronation Small Grant Application Form**

1. **Complete the following information relating to your group**

|  |  |
| --- | --- |
| **Group name** (if applicable) |  |
| **Name of person submitting application**  |  |
| **Applicants’ role in the group** (if applicable) |  |
| **Contact telephone number** |  |
| **Contact email address** |  |
| **Bank account name** |  |
| **Bank name and address** |  |
| **Bank account number** |  |
| **Bank sort code** |  |
| **Please send** **a copy of a page of a recent (less than 3 months old) bank statement that includes the name and address of the organisation or person that will hold any grant awarded**  |

1. **Tell us about the activity you want funding for**

|  |  |
| --- | --- |
| **What is the event or activity?** Street party, volunteer activity etc |  |
| **When will the event or activity take place** Please include date(s) and time(s) |  |
| **Where will it be held?** Please provide the address / location |  |
| **Who is the activity for and how many people do you expect to attend?** Provide details of who will participate in and benefit from this event |  |
| **Have you applied for or received funding for this event or activity from any other party such as a Parish Council, or National Lottery?** If yes, please provide details |  |
| **Provide details of the activity** –what will it consist of / what will happen at the event? |
|  |

1. **Please tell us about the costs related to your activity**

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| Please tell us what you will be using the grant money for (e.g hall hire, food, materials, etc.) *Insert or delete rows as required. Please see guidelines for further information on allowable costs. Note that awards will be limited to £500 in total. As part of our monitoring, we may ask for copies of receipts as evidence of expenditure of the activity applied for.* |
| **Item of expenditure** | **Anticipated Cost**  |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |

1. **Declaration**

If signing on behalf of a group I am authorised to sign this application on behalf of the group named.

I confirm, that:

* All answers to the questions on this form are correct to the best of my knowledge and belief.
* The event or activity will be undertaken in accordance with the criteria specified in the guidelines.
* We undertake that any funding made available by the Council, or such part of it as the Council may determine, shall be repaid if the group:
	+ is found to be in breach of the guidelines, or
	+ if the funding is unspent for the purpose allocated, or
	+ if the event does not take place.
* We will ensure the activity is organised safely, adequately insured and acknowledge that we take full responsibility for the activity.
* We will provide to Milton Keynes City Council any further information regarding the groups and/or the event or activities on request.
* We will provide to Milton Keynes City Council on request proof that the grant has been spent in accordance with the details provided on this application.

|  |  |  |
| --- | --- | --- |
|  | Signatory 1 | Signatory 2 |
| **Name** |  |  |
| **Signature** Please type if returning online |  |  |
| **Role in the group**For example organiser, treasurer |  |  |
| **Email** |  |  |
| **Phone Number** |  |  |
| **Contact Address** |  |  |
| **Date of signature** |  |  |

1. **Submitting your application**

Please return the completed application form and supporting documents by the deadline stated in the Application Information guidance, by email to: dsbusinesssupport@milton-keynes.gov.uk, ensuring that you CC a representative of the Partner Organisation (if applicable)