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| Project name and description: For Office use only   |
| Project number:  |  |
| Date received:  |  |
| Trustees’ decision and date:  |  |
| Amount awarded:  |  |
| Donation sent/ bank receipt date:  |  |
| Date receipt received from recipient  |  |
| Additional evidence received (report, photo etc): |
| Other comments:  |



# **APPLICATION FORM FOR PROJECT FUNDING**

*Please read the attached criteria for individuals applying for funding to support projects prior to completing this form. Please note that applicants must have close links with St Mary’s University in order to be eligible for funding.*

*Please complete in typescript throughout*

**1 Name, address, telephone number and email**

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**2 Title of project/activity for which funding is being sought**

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**3 Include here evidence of links with St Mary’s University (e.g. through a staff member, former or current student(s)**

**4. Description of project/activity**

Please provide a clear summary stating what project/activity you are applying for funding for. Include details of the work to be undertaken, the timescale of the project (and timetable for expenditure of funds if significantly different) and the benefits/impacts of this work to the community in which you will be working.

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**5 Costs**

Please provide a detailed breakdown of what you require funding for (inclusive of VAT if relevant). You may need to estimate some costs e.g. travel costs.

|  |  |
| --- | --- |
| Item | Cost |
|  |  |

###### 6 Other support/funding

Do you have or are you planning to apply for any other funding to support this work? If so please provide brief details.

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###### 7 Referee

Please provide the name, address and email of **ONE** independent referee who we can approach for a reference if necessary.

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