

## **Community Support Grants Application Form**

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Please ensure you read all of the guidance **BEFORE** you complete the form.

- Information requested in this application form is the **minimum required** for a grant to be considered. Applicants can send additional information via email once the form is submitted if necessary.
- Confirmation that any grant made will benefit the communities of the Durham Masonic Province i.e. the traditional County of Durham between the rivers Tyne and Tees. (If national, you may apply to The Masonic Charitable Foundation <a href="https://mcf.org.uk">https://mcf.org.uk</a>)
- You have read the Guidelines for Community Support Grants which are attached and your application complies with the rules and regulations of Durham Freemasons Charity.

 $\frac{https://pgldformswebsitestorage.blob.core.windows.net/\$web/How\%20to\%20Guides.files/PDF/DB/Guidelinesfor-Community-Support-Grants.pdf$ 

- The application form must be completed in full all at once (you can not save and return later) Before starting to complete the form, it might be helpful to download a copy of all questions to assist in gathering the required information.

https://pgldformswebsitestorage.blob.core.windows.net/\$web/How%20to%20Guides.files/PDF/DB/DB-CSGExample.pdf

- If applying on behalf of a Registered Charity, Full Audited Accounts must included (not more than 15 months old). If not a Registered Charity, a financial statement of income/expenditure must be included (for the past 12 months). Instructions on sending these will be sent via email after submission of this form.
- The declaration has been completed by an authorised representative of the Charity applying for funding

Please note the accounts, financial statement and any other supporting evidence, may be emailed to the Durham Freemasons Charity Community Support Grants Committee <u>after</u> this form is submitted (Instructions will automatically be sent via email after submission).

The Durham Freemasons Chaorty C.S.G. Committee meets quarterly (February, May, August and November) and applicants are informed of the outcome during the following month.

## **Community Support Grants Committee**

Durham Freemasons Charity Ltd 8 The Esplanade Sunderland SR2 7BH **Tel No:** (0191) 567

5365

Fax No: (0191) 567 1276
Email: charity@durhamfreemasons.org
Website: www.durhamfreemasons.org
Registered Charity Number: 279313

\* Required

Previous Applications

1. Have you received a grant from Durham F

## 1. Have you received a grant from Durham Freemasons Charity within the last 3 years? Please Note, If you have received a grant from Durham Freemasons Charity within the last 3 years we are unable to process this application further. **Contact Information** 2. Name of charity. \* 3. Name of contact person. \* 4. Job title of contact person. \*

5. Main charity address. *
6. Correspondence address (if different).
7. Talanhana (Mahila numban t
7. Telephone/Mobile number. *
The value must be a number
8. Email address. *
Please ensure accuracy as a receipt of this submission will automatically be emailed to this address, as well as instructions for submitting additional supporting documents.
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9. Website Address.
10. Are you a Registered Charity? *
Yes
O No

11. Registered charity number *	
About the Charity	
12. Please give a brief outline of the aims of the charity *	
13. Please identify how this charity supports people within the Province of Durham. *	
14. Number of Full time staff at Head Office. *	
The value must be a number	
15. Number of Full time staff at Other Locations. *	
The value must be a number	
16 N	
16. Number of Part time staff at Head Office. *	

The value must be a number

17. Number of Part time staff at Other Locations. *	
The value must be a number	
18. Number of Volunteers at Head Office. *	
10. Number of volunteers at flead Office.	
The value must be a number	
19. Number of Volunteers at Other Locations. *	
The value must be a number	

## **Grant Requested**

20. Please state why you would like a grant and for what purpose it will be used? *
21. Please provide an estimate of the amount needed / requested. *
The value must be a number
22. If a grant was made, please provide Bank Account details as payments are made by BACS. *
Please include the Bank Name, Name on Account, Account Number and Sort Code.
Declaration
I am an authorised representative of the above named charity/organisation.
To the best of my knowledge the information I have provided on this application form is correct.
If Durham Freemasons Charity agrees to make a grant, this will be used exclusively for the purposes described in this
application form.
23. Type in your name. *
24. Position in organisation. *

	<b>⊞</b>	
26. Please tell us how you hea	ard about the application process. *	
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