

## THE PFC TRUST: Registered Charity Number: 1187479

Please only proceed if you can answer Yes to the following:  
‘I have read and understood the PFC Trust Grant Making Policy’

### Section 1

Details of the Person Submitting the Application			
Name:		Date:	
Address:			
Telephone Contact:			
Email Address:			
Job Title/Role in the Organisation/Event:			

### Section 2:

Details of the Application			
Name of the charity/organisation/event:			
Registered charity/business number (if applicable:)			
Type of funding you are requesting:	Grant:		Scholarship:
Date of event (if applicable):			
Expected length of event/project:	Years		Months
Expected start date:			
Expected end date:			
Date when funds would be required:			
Total cost of the even/project you are fundraising for:	£		
Amount requested from The PFC Trust:	£		
Will your organisation obtain (of apply for) funding for the event/project from any other source?:	YES		NO
If YES, please list all other sources of funding and amounts being provided/applied for from each source			
Enter Text Here Please continue on another page if required			
If NO, please state your reasons why			

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Enter Text Here Please continue on another page if required			
Will any of the funding go towards your core operational costs or overheads?:	YES		NO
If YES, how much?:	£		
Will your organisation be able to carry out the event/project without funding?	YES		NO
If YES, please explain your reasons for applying			
Enter Text Here Please continue on another page if required			
If NO, please state what your contingency plan is if you do not receive funding			
Enter Text Here Please continue on another page if required			
Are there any other organisations that provide the same or similar service that you are requesting funds for? (if applicable)	Yes?		No?
If YES, please give details of the other services and explain why your service is different.			
Enter Text Here Please continue on another page if required			

<b>Please tick the following to indicate the charitable purpose/s you are seeking funding for</b>			
The Advancement of Education		The Advancement of the Arts	
The Advancement of Amateur Sport		The Advancement of Environmental Protection and Improvement	
Health		Age Related (Young/Elderly)	
Financial Hardship		Other	
If OTHER, please give details			
Enter Text Here Please continue on another page if required			
<b>Please supply a brief description of the project/event (maximum 500 words)</b>			
Enter Text Here Please continue on another page if required			

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**Tell us about the purpose of the project/event (maximum 150 words)**

Enter Text Here

Please continue on another page if required

**Please tell us how you think the project/event will benefit the public/community (maximum 400 words)**

Enter Text Here

Please continue on another page if required

**Please tell us the area/s of Hartlepool and how many people will benefit from the project/event (maximum 50 words)**

Enter Text Here

Please continue on another page if required

**Please provide a breakdown of the requested funding**

Enter Text Here

Please continue on another page if required

**If you have applied with us before, please let us know the amount, date and reason for the funding.**

Enter Text Here

Please continue on another page(s) if required

**You are requested not to share any information contained on this form without consent of THE PFC Trust. Thank you.**

**Section 3:**

**Agreement**

I confirm that I agree to all the terms, principles and application process as detailed in the PFC Trust Grant Making Policy

**Signature:**

**Application Review Form**

Request Reviewed on: dd / mm / yyyy

Details:

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Outcome:	<b>YES</b>	<b>YES (with stipulations)</b>	<b>NO</b>
Details of any Stipulations:			
Signature of Trustee:	Signature		Date
Signature of Trustee:	Signature		Date

<b>Feedback Form</b>		
Date Applicant Informed:	dd / mm / yyyy	
Name of Applicant informed:		
Bank Details of Applicant if fund agreed:		
The PFC Trust Cheque Number if Cheque Provided:	Cheque Number	£ Amount
Signature of Trustee:	Signature	Date

