**Before completing this form you should read ‘Lintel Trust Grants Programme Information & Guidance for Applicants’.**

**If you have any queries regarding your application please contact Lintel Trust.**

**SECTION 1 - Contact Details**

|  |  |  |
| --- | --- | --- |
| **Tick this box to confirm you are authorised to submit this application on behalf of your organisation.** | |  |
| **Contact person** |  | |
| **Job title/Position** |  | |
| **Contact address** |  | |
| **Postcode** |  | |
| **Work number** |  | |
| **Mobile number** |  | |
| **Email address** |  | |

**SECTION 2 - Your Organisation**

|  |  |
| --- | --- |
| **1. Organisation Name** |  |

|  |  |
| --- | --- |
| **2. Type of Organisation** |  |

|  |  |
| --- | --- |
| **3. Scottish Charity Number**  **(If applicable)** |  |

|  |  |  |
| --- | --- | --- |
| **4. Number of Staff** | **Full Time** | **Part Time** |
|  |  |

|  |  |  |
| --- | --- | --- |
| **6. Does your organisation have an Equal Opportunities Policy?** |  |  |
| If the answer to the above question is no, please confirm you are in the process of establishing this. | | |

**SECTION 3 -THE PROJECT**

|  |  |
| --- | --- |
| **1. Name of project** |  |

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| --- | --- |
| **2. Number of volunteers** |  |

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| --- |
| **3. Which local authority area will the project be delivered in?** |
|  |
|  |
| **4. Which of Lintel Trust’s aim is your project addressing?** |
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| **5. Provide a brief description of the project and how it will be delivered.** |
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|  |
| **6. How many project beneficiaries do you anticipate?** |
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|  |
| **7. Tell us why you are carrying out this project and what evidence you have that this project is needed.** |
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| --- | --- | --- | --- |
| **8. How many staff will be involved in the Project?** |  | **9. How many volunteers will be involved in the Project?** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **10. Project Dates** | | | |
| **Start Date** |  | **End Date** |  |

|  |
| --- |
| **11. Please use the table below to show the main stages of your project and when you intend to complete them.** |

|  |  |
| --- | --- |
| **Main Stages of the Project (Milestones)** | **Completed by Date** |
| **Example - Buy IT equipment** | **01/01/2016** |
|  |  |
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| **12. Please list all other organisations involved in the Project if applicable.** |
|  |

**SECTION 4 - FUNDING**

|  |  |
| --- | --- |
| **1. Please state the total project amount** | **£** |

|  |  |
| --- | --- |
| **2. How much are you asking Lintel Trust for?** | **£** |

|  |  |
| --- | --- |
| **3. When will the grant be needed?** |  |

|  |  |  |
| --- | --- | --- |
| **4. Please show a breakdown of the cost of the project. Include VAT as appropriate.**  **Where possible, please submit 2 quotes for work, equipment or items that are included in the costs** | | |
| **Description of Cost** | **Total Cost** | **Amount requested from Lintel Trust** |
| **Example - IT Equipment, 2 laptops and 2 tablets** | **£ 800** | **£ 800** |
| **Example – Room Hire** | **£ 500** | **£ N/A** |
|  | **£** | **£** |
|  | **£** | **£** |
|  | **£** | **£** |
|  | **£** | **£** |
|  | **£** | **£** |
|  | **£** | **£** |
|  | **£** | **£** |
| **Total Project Amount** | **£ Enter total amount** | **£ Enter total amount** |

|  |  |  |  |
| --- | --- | --- | --- |
| **5. List all sources of funding for your project (including any of your own organisation’s contribution)**  **Please note that your total project funding listed here should equal the total project cost that you have stated in the table in question 4.** | | | |
| **Name of Funding Organisation** | **Amount** | **Status** | **STATUS OPTIONS**  **A= Applied for**  **B= Agreed in principle**  **C= Conditional on obtaining other funding**  **D= Fully approved** |
| **This Application** | **£** |  |
|  | **£** |  |
|  | **£** |  |
|  | **£** |  |
|  | **£** |  |
|  | **£** |  |
|  | **£** |  |
| **Total Project Funding** | **£ Enter total amount** |  |

|  |
| --- |
| **7. If your organisation has reserves, our trustees will need to know why these are not funding your project.** |
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| **8. All grants will be paid by cheque or BACS. If you are successful, please provide bank details or details of the account the cheque should be made payable to.** |
|  |

**SECTION 5 - Project management AND ASSESSMENT**

We are keen to be able to assess the social impact of projects supported by the Lintel Trust and would request your help in this.

On receipt of your funding award, we will supply you with details of what feedback we will be looking for at the end of the award period. We can provide you with the tools needed to monitor your project if you do not have an existing process in place.

|  |
| --- |
| **1. How will the project be managed?** |
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| --- |
| **2. Do you have an existing monitoring process in place to assess the success of the project? Please give details below.** |
|  |

**GENERAL INFORMATION**

|  |
| --- |
| **1. Please use to this space to provide any further information that is relevant to your application. (Max 500 words)** |
|  |

|  |
| --- |
| **2. Have you applied to the Lintel Trust Grants Programme before? If yes, when was your most recent award?** |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **3. You are required to provide the information below with your application**  **Failure to enclose these essential documents without an appropriate explanation will lead to your application being rejected**  **Please submit copies with your application and complete the table below to show that you have enclosed this supporting information** | | | |
| **Information to be Enclosed** | **Enclosed**  **Please Confirm** | | **If you entered NO then please explain why.** |
| **YES** | **NO** |
| 1. A copy of your organisation’s constitution or founding document |  |  |  |
| 2. A copy of your organisation's latest annual accounts or last 3 month’s bank statements |  |  |  |
| 3. A copy of your organisation’s most recent annual report (if available) |  |  |  |
| 4. A copy of your organisation’s equal opportunities policy |  |  |  |
| 5. A copy of your organisation’s protecting vulnerable people policy (where the proposed project beneficiaries include vulnerable adults or children) |  |  |  |

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| **How did you hear about Lintel Trust?** |  |
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| **Privacy Notice** |
|  |
| By completing this form you consent to the Lintel Trust processing and storing data about your organisation to assist us in making decisions.    As you have accepted the offer of assistance from the Lintel Trust, we will keep the information in our files. Throughout the time we provide support we may add to or change the information in your file. This will reflect additional information becoming available from you, from other people or agencies or from our own observations.    We may share your information with other parts of Link Group, our agents or other service providers and other third parties from whom we may seek information about your organisation. We may also share your information with local authorities, police and other statutory bodies but only as required by law or where this has been agreed with you beforehand.    You have a right to apply for a copy of information on your organisation held by us and to have any inaccuracies corrected.  To view our full privacy statement with retention periods, please click [here](https://linteltrust.org.uk/privacy-statement/) or contact us on 01324 466873 to request a copy of our Data Protection Policy. |

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|  |
| **Terms & Conditions** |
| **STANDARD CONDITIONS OF GRANT**  The following conditions must be accepted by your organisation as part of the award of grant. Staff at Lintel Trust will be happy to clarify any of these conditions if required.   1. The grant **must be used solely for the purpose stated in the application form.** 2. The organisation **must keep appropriate records** of how the grant was spent and produce these figures in a project/activity report as appropriate. 3. The organisation **must provide** monitoring and evaluation information when requested, including copies of publicity material, reports etc funded by Lintel Trust. 4. You should **ensure** that publicity and promotional material about the organisation and its activities appropriately reflects the support given by Lintel Trust. 5. **Lintel Trust reserves the right to claim back any grant or part of a grant which has not been used for the purposes agreed.** 6. Any offer of grant will remain valid for a period of 12 months from the date of the letter of award. This may be extended in exceptional circumstances (at the discretion of Director/Trustees)   Any special conditions will be detailed in Lintel Trust’s offer letter. |

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| --- | --- | --- | --- | --- |
| **As the applicant organisation’s representative tick this box to declare that:**  **1. You understand the data protection section and terms and conditions above**  **2. The information that has been provided is true, to the best of your knowledge, at the time the application is made**  **3. That any assistance provided by the Lintel Trust will be used as stated in the application form**  **4. That this application is not for staff salaries**  **5. That this application is for no less than 30% of the total project cost.** | | | |  |
| **Name** |  | | | |
| **Position** |  | **Date** |  | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **OFFICE USE ONLY** | | | | | | | | |
| **Date received** |  | | | **Application No** | | **Decision:** | | |
| **Decision** |  | | | | | | | |
| **Signed** |  | | | | | | **Date** |  |
| **Authorised By (Print Name)** | | |  | | | | | |
| **Date applicant organisation notified** | |  | | | **Date assistance provided** | |  | |

Once completed, please email this form to:

[enquiries@linteltrust.org.uk](mailto:enquiries@linteltrust.org.uk)

Or post to:

Lintel Trust

Link Academy

McKinven House

George Street

Falkirk

FK2 7EY

Telephone: 01324 466873

Website: [www.linteltrust.org.uk](https://aodocs.altirnao.com/webdav/Phfl9um3gSiyZOATf9/PbTnxsgsTYV9yessd9/PhaaHlz5eqXOjwIFbc/www.linteltrust.org.uk)

If you need any help or advice on completing this form please contact us by telephone.