



the
**Charity
Service**

Making more
of **every gift**

Cinderella Fund
Group application



Application for financial assistance for a group holiday

Introduction:

Completing this form is not a guarantee that assistance will be provided.

You will be informed in writing at a later date how much grant aid, if any, has been approved.

By completing the application form, you are agreeing on behalf of your group/organisation to abide by the terms and conditions of funding.

Grants are not approved retrospectively, and it is a condition of the grant that our Report form is completed and submitted after the holiday has taken place.

Section 1

Information about your group/organisation and the proposed holiday:

Please answer every question. Either type your answers or use clear writing.

General Details:

1. Name of Group/Organisation

Address

Telephone

2. Name of project (if different)

Address

Telephone

3. Name of contact in case of a query

Telephone (daytime)

4. Has your group/organisation only been formed to run this holiday?

Yes

No

5. Please give names and addresses of the following:

a) Chairperson/Head teacher

Address

Telephone. (daytime)

b) Applicant

Address

Telephone (daytime,
if applicable)

Section 2

Details of proposed holiday:

6. Where are you going? (If you know precisely please say. If not, say what general area you are going to).

7. What type of accommodation will you book? (If you have made a provisional booking already, please give details).

8. How will you travel to/from your holiday destination and travel around whilst on holiday?

9. When will the holiday be? (give dates, or approximate time if not yet known).

10. How long will the holiday be?

11. What types of activities will the children be involved in whilst on the holiday?

12. How many children will go? (approximately)

13. From what area(s) will the children be drawn?

14. What are the ages of the children?

15. State below why this holiday is necessary. Some description of significant circumstances is necessary which would include family backgrounds and the social and economic character of the area. Please give any further details. The trustees reserve the right to make any independent enquiries they may think advisable

16. How many responsible adult helpers will be going? (It is expected that there will be a minimum of one helper to eight children, taking care to ensure appropriate male/female ratios are provided).

17. Please confirm that all adult helpers have had the appropriate DBS check. Please attach a copy of your safeguarding policy. (Please note that any grant will be conditional on the trustees being satisfied that adequate procedures are in place. You may wish to contact Manchester City Council - Social Services Department, who would be able to advise on such procedures).

I/we confirm the above (17.)

Section 3

The costs of the holiday towards which you can apply for a grant:

18. You can apply for money to meet some or all of the following expenses:

	Total costs £
a) Travel costs	£
b) Accommodation	£
c) Insurance	£
d) Other costs (please specify)	£
TOTAL:	£

19. Please state how much you are applying for from the Cinderella Fund:

£

20. Will you be charging families (or others) to send children/families on your holiday? Yes No
If you will, please give details of how much and what this is for.

21. Has an application for funds been made to any other trusts/charities?
If so, please state which, and with what result.

22. What amount of cash, if any, has been raised by yourselves and by what method?

Section 4

Payment of any grant approved:

- 23.** Please give the bank details of the organisation to which payment should be made. Please provide a copy of a recent bank statement
(PLEASE NOTE PAYMENT WILL NOT BE MADE TO AN INDIVIDUAL).

Signatures:

To the best of our knowledge, the information provided in this application is correct, and we agree to keep to the terms and conditions stated should any grant aid be provided. We understand that the completion of this form does not guarantee that any funding will necessarily be approved.

We also agree to contact the Secretary of the Fund concerning any changes to the details provided in this form.

Signed on behalf of the Group/Organisation:

Chairperson's/Head teacher's Name (BLOCK CAPITALS)

Signature

Applicant's Name (BLOCK CAPITALS)

Signature

Date:

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Important Information

Please ensure you have enclosed:

- Latest bank statement
- Latest accounts
- Safeguarding Policy'

The completed form should be EMAILED TO enquiries@charityservice.org.uk

Please ensure ALL questions have been FULLY answered.



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