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| --- | --- |
| **name of project:** |  |
| **Amount Applied for (£):** |  |

|  |
| --- |
| **SECTION 1**  **Please tell us about your group or organisation.**  *(What do you do?  Where do you meet?  Who comes to your group? Give as much information as possible to help us know more about your group or organisation).* |
| *(Please continue on a separate page if required)* |

|  |  |  |  |  |  |
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| **Do you have a constitution (or a set of rules)?** *Please circle or highlight.* | | | | | |
| Yes | No | Would like support to create one | | | |
| **Is this application sponsored by a constituted organisation?** | | | | | |
| Yes | No |  |  |  |  |

|  |  |
| --- | --- |
| **Please provide the following information if you have it** | |
| League / Governance / Body Registration or Affiliation Number |  |
| Charity Number |  |
| Company Limited by Guarantee Number |  |
| **SECTION 2**  ***Please tell us what you would like a grant for and why?*** | |
| ***How will this promote healthy eating, support community growing schemes, alleviate food poverty, or address any other healthy food related activity in Mayfield and Easthouses?*** | |

**SECTION 3**

Please list everything you will purchase/pay for with this grant.  Please make costs as accurate as possible and if any item costs more that £100 be aware that you will need to provide at least one quote.

| **Item or activity** | **Cost** | **Total cost requested** |
| --- | --- | --- |
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| **TOTALS** |  |  |

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| **SECTION 4** | |
| **Group name:** |  |
| **Applicant’s name:** |  |
| **Address:** |  |
| **Postcode:** |  |
| **Contact** 🕿 |  |
| **Contact email:** |  |
|  |  |

I confirm that I have the authority to submit this application on behalf of my project/organisation.

I agree to this application being shared with the funding panel and with members of the public at the decision-making event.

|  |  |
| --- | --- |
| **Signature:** |  |
| **Position:** |  |
| **Date:** |  |

The closing date for applications is: **Monday, 8 May 2017**

**Please ensure you have enclosed a copy of your constitution or set of rules.**

**The steering group reserve the right to ask for further information regarding your application, which you are obligated to provide.**

**Return form (s) by email to:** [pbgrants@midlothian.gov.uk](mailto:pbgrants@midlothian.gov.uk)

**or by post to:**

Barbara Scott

Midlothian Council

Fairfield Houses

Lothian Road

DALKEITH, EH22 1DN