



WEST LOTHIAN SPORTS COUNCIL

www.westlothiansportscouncil.org.uk

GRANT SCHEME APPLICATION FORM

PLEASE COMPLETE ALL QUESTIONS & PRINT DETAILS

GRANT FORM NO:

DETAILS OF APPLICANTS:

<p>Name of Club:</p> <p>Name of Secretary:</p> <p>Secretary Address:</p> <p>Contact Telephone No:</p> <p>Email:</p>	
<p>Name of Treasurer:</p> <p>Treasurer Address:</p> <p>Contact Telephone No:</p> <p>Email:</p>	
<p>Club Venue Address:</p> <p>Purpose of Organisation:</p> <p>Year Established:</p> <p>Are your members predominantly from West Lothian? Yes [] No []</p> <p>Is the club affiliated to West Lothian Sports Council? Yes [] No []</p>	

<p>Is the club affiliated to a governing body of sport recognised by SportsScotland? <i>If yes please detail:</i></p> <p>Please state the amount of grant aid received and what it was for in the last 12 months:</p> <p>Please indicate the status of all current applications to funding bodies:</p> <p>To whom should the cheque be paid if application is successful?</p>	<p>Yes [] No []</p> <p>West Lothian Sports Council: £ Any other source: £</p> <p>Name:</p>
<p>Please indicate which specific category you are applying for:</p>	
<p>Please describe what your grant would be used for and how many people will benefit:</p>	

CHECKLIST:

All the above sections have been answered (This is necessary in order for your application to be processed)	Yes []
Application has been signed	Yes []
You have included a copy of your constitution and child protection policy	Yes []
Submission of audited accounts for the last financial year with copy of latest bank statement	Yes []
<p>Club Start Up</p> <p>Equipment</p> <p>Coaching/Training</p> <p>Achieving Excellence</p> <p>Discretionary</p>	<ul style="list-style-type: none"> • Budget Plan with details of expenditure and income [] • Itemised list of equipment with breakdown of costs [] • Two written quotations included from two separate suppliers [] • Details of course & copy of provisional acceptance [] • Breakdown of expenditure for the course [] • Details of squad/competition [] • Breakdown of expenditure and contributions from club and other sources [] • Detailed breakdown of expenditure and income [] • Details of the project/event, how many people involved, the benefits []

CONFIRMATION & DECLARATION:

I can confirm that to the best of my knowledge the information given above is correct.

Signature of Chairperson or Treasurer:

Print Name:

Date:

COMPLETED APPLICATIONS SHOULD BE SENT TO:

Anne Gurney, 45, Ennis Park, Polbeth, West Calder, West Lothian, EH55 8TN

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Date Received:	Previous Grant:	Acknowledged:
Action Taken:	Reference:	Constitution:
Audited Accounts:	Bank Statement:	Child Protection Policy:
Quotes:	Decision:	Type of Organisation:

Supported by : 

Members of : 

