



FOR OFFICE USE ONLY

Application Form for Grant or Loan

A. DETAILS OF YOUR ORGANISATION

Name:

Address:

Post Code:

Telephone Number:

E Mail:

Registered Charity Number:

Person to contact:

Position in Organisation:

Aims and Objectives of your Organisation:

B. AMOUNT APPLIED FOR
 State amount you are applying for
 (net of VAT if exemption applies)

GRANT

£

LOAN

£

C. PURPOSE OF APPLICATION

State briefly the purpose of grant loan (see also Section G):

D. OTHER FUNDING

Have you tried or do you intend to try any form of self-funding?

What other source of funding have you sought for this specific need?

E. FUTURE FUNDING

How will you fund this need in future?

F. THE BENEFIT TO PEOPLE

How many people will benefit, and how?

G. FURTHER INFORMATION

Please include any additional information you feel would be helpful to the Catalyst Charity in considering your application. Where appropriate, include a cost breakdown, quotations, literature and annual accounts.

ARE YOU PART OF OR CONNECTED WITH A STATUTORY BODY?

If yes, please explain why is this application not being met from statutory funds?

PLEASE INCLUDE A LETTER TO THIS EFFECT FROM THE COMMISSIONING BODY

Please send a copy of your latest Report & Accounts and any written quotations and any other relevant information that may help your application.

I declare that the information given in this form is correct and complete.

Signature _____

Date _____

Please return this form to:

**The Administrator
Colchester Catalyst Charity
14 Dedham Vale Business Centre
Manningtree Road, Dedham,
Colchester, Essex CO7 6BL
Tel: 01206 323420
Email info@colchestercatalyst.co.uk**