Rosemount Development Trust

Community Benefit Fund Application Form

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| --- | --- |
| Date |  |

|  |  |
| --- | --- |
| Name of Organisation |  |
| Address |  |
| Post Code |  |
| Organisation Website |  |

|  |  |
| --- | --- |
| Contact Person |  |
| Position Within Organisation |  |
| Telephone Number |  |
| Email Address |  |

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| --- | --- |
| Have you received funding from RDT before? | Yes/No |

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| Please provide a brief description of your organisation and the activities you deliver |
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| Please describe the project or activity you are seeking funding for |
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| Which option best describes the project or activity you are applying for? (Check any applicable boxes) |
| To benefit residents of Royston |[ ]
| To benefit areas neighbouring Royston |[ ]
| Please specify any areas out with Royston which will benefit |
|  |
| To relieve unemployment |[ ]
| To advance citizenship and community development |[ ]
| To relieve those in need by reason of age (young or old) |[ ]
| To relieve those experiencing ill-health |[ ]
| To assist those affected by disability |[ ]
| To assist those facing financial hardship |[ ]

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| --- | --- |
| Please provide indicative dates for when the project or activity will start and end |  |

|  |  |
| --- | --- |
| What is the total cost of this project or activity |  |
| How much funding are you requesting from Rosemount Development Trust |  |

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| Any other relevant information (optional) |
|  |

Declaration:

By submitting this form I confirm that:

* To the best of my knowledge, all information included is correct
* I am authorised to apply to the Rosemount Development Trust Community Benefit Fund on Behalf of my organisation

Signed:

Date: