

Rosemount Development Trust  
Community Benefit Fund Application Form



Date	
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Name of Organisation	
Address	
Post Code	
Organisation Website	

Contact Person	
Position Within Organisation	
Telephone Number	
Email Address	

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

Please describe the project or activity you are seeking funding for

Which option best describes the project or activity you are applying for? (Check any applicable boxes)	
To benefit residents of Royston	<input type="checkbox"/>
To benefit areas neighbouring Royston	<input type="checkbox"/>
Please specify any areas out with Royston which will benefit	
To relieve unemployment	<input type="checkbox"/>
To advance citizenship and community development	<input type="checkbox"/>
To relieve those in need by reason of age (young or old)	<input type="checkbox"/>
To relieve those experiencing ill-health	<input type="checkbox"/>
To assist those affected by disability	<input type="checkbox"/>
To assist those facing financial hardship	<input type="checkbox"/>

Please provide indicative dates for when the project or activity will start and end	
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What is the total cost of this project or activity	
How much funding are you requesting from Rosemount Development Trust	

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: