

Donation Application

(To be completed by the applicant)

Please send the completed form to
Richardson Brothers Foundation 100 Dudley Road East, Oldbury, West Midlands B69 3DY

Registered charity number*	<input type="text"/>	Date established	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>* or inland revenue tax exemption reference number/Registry of Friendly Societies number</small>		Date of Application	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of charity	<input type="text"/>								
Contact address	<input type="text"/>								
	<input type="text"/>	Postcode	<input type="text"/>						
Name of contact	<input type="text"/>	Title	<input type="text"/>						
Position	<input type="text"/>								
Daytime telephone number <small>(and best time to contact)</small>	<input type="text"/>	Mobile number	<input type="text"/>						
Email	<input type="text"/>	Website	<input type="text"/>						

1 Background to charity

a What is the purpose of your Charity?

b Where do you work? (geographical area) and in which Country ?

c What is the structure of your organisation, including number of trustees/management committee members, management team, other employees and volunteers?

Trustees/management Committee members Part time staff Full time staff Volunteers

2 Current activities

a What are your current activities?

b Who benefits from the service?

c How many people benefit each year ?

3 What do you want funding for?

Please give details of the project or part of your work for which you are applying for funds (including geographical location). If you are applying for support towards a salaried post please include a job description

4 How much funding are you requesting?

£

5 What will this be used for?

Please provide a breakdown of how you intend to spend the grant - continue on a separate page if necessary

Note: questions 6, 7, 8 and 9 should only be completed if the intention is for the project or service to be partially funded by the Richardson Brothers Foundation and if additional funding will be obtained from other sources

6 What is the overall cost of the project or service for which funding is sought?

If this is part of a larger project/service ? £

7 Please give a breakdown of total costs

8 How much have you already raised towards this project or service?

Indicate how much you have raised so far towards the total needed, and from what sources

Checklist

To help speed the processing of your application for a donation, here is a checklist for your convenience. Remember to include the following information

Before returning the application form, tick off the relevant items to ensure that all the required information is enclosed and return to us.

Application form

- | | |
|--|-------------------------------|
| • Please complete carefully and ensure all parts of the application form are completed | Tick <input type="checkbox"/> |
| • Ensure the application form is signed by two representatives of your organisation | <input type="checkbox"/> |
| • In question 1c please put a figure in the structure boxes, and not a tick | <input type="checkbox"/> |
| • Check your email address | <input type="checkbox"/> |
| • Incomplete applications will be returned | |

Enclosures

- | | |
|---|-------------------------------|
| • Please provide us with a copy of your most recent signed audited accounts | Tick <input type="checkbox"/> |
| • Please ensure you have enclosed a job description when you are applying for support towards a salaried post | <input type="checkbox"/> |

Please remember, the above information will help with the processing of your application for donation.

We are unable to consider applications if support was provided in the last twelve months.

Unfortunately, we are unable to support every application we receive and the Trustees decision is final, we regret we are unable to give feedback on individual applications

Should you require any help in the completion of this form or need clarification please do not hesitate in contacting us on 0121 423 3335.

Signatories

We require all applications to be signed by two representatives of the organisation. One of the signatories must be a trustee or a representative of senior management and should not be the same person as the named contact.

First Signatory

Name

Position

Second Signatory

Name

Position

For office use only

Approval of Trustees

Name

Date

Approval of Committee

Name

Date