



Stratherrick and Foyers Community Trust  
**Constituted Group for Community Benefit Grant**  
Application Form

Grant Reference  
for Trust use.

**Use this form to apply for a grant for your group of up to £20,000.**  
**Use this form only if your group has a Constitution.**

Please refer to the Constituted Group for Community Benefit Grant **Guidance Notes**. They will help you to complete this form. If you need any additional help or have any questions about eligibility or assembling the supporting information please contact the Trust's Project Coordinator on [pc@sfctrust.org.uk](mailto:pc@sfctrust.org.uk)

**Section One – Applicant and Contact Details**

Name of Group	
Contact Person and Position e.g. Treasurer	
Telephone Numbers Mobile / landline	
e-mail address	
Correspondence Address for this application including Postcode.	
Is this a business address or a private address?	<i>Business / Private</i>
Your Organisation's address and Postcode (if different from above).	
Is this address a business or a private address?	<i>Business / Private</i>

**Section Two - About your organisation.**

1 What are the main activities of your group or what service do you provide?

2	In which year was your organisation established?
3	What is the total cost of the project?
4	Please state if you are a registered charity or not, and if so, include your charity number.
5	Please state the number of Committee Members / Directors / Trustees on your management committee.
6	Please state the number of full and part time staff your organisation employs.
7	Please state the number of regular volunteers in your group.

### Section Three - Your organisation's activities.

1	Please describe the residents of Stratherrick and Foyers who are involved with your organisation as members or beneficiaries. Please estimate how many residents are involved on a monthly or annual basis.
<p><i>Note - If you work with Children or vulnerable adults you must include a copy of your Child / Vulnerable Adults Protection Policy with your completed application form.</i></p>	
2	How does your group consult and involve local people to ensure the group is providing a valuable and responsive service?
3	Which other organisations provide a similar service or activity in Stratherrick and Foyers?

### Section Four – Your organisation's Bank Account Details

**We may use these details to make BACS payments so accuracy is essential.**

Bank	
Sort Code	
Account Name	
Account number	

### Section Five – Your organisation’s Financial Details

This Section should be completed using your latest set of annual accounts. You must also include a copy of your latest annual accounts, checked and signed, with the application form.

If you are a new group, please include a projection of income and expenditure instead.

1 Do you have annual accounts? Please state Yes or No. If you do not have annual accounts then the Trust may be unable to offer you a grant, unless you are a new group.

YES / NO If no, please state why.

2 How many people’s signatures are required to authorise cheques and payments?

3 Are any of these signatories related? (Please refer to the Guidance Notes for details.)

4 The Trust requires that your annual accounts are inspected by a suitably competent person who is independent of your organisation. Please state who has done this for you. This person should also have signed the accounts as “EXAMINED”.

Name of Examiner and the position they hold –

Please extract the following figures from your annual accounts and insert them below.

What was your organisation’s total income in the last accounting year?

£

What was your organisation’s total expenditure in the last accounting year?

£

What was your organisation’s surplus or deficit in the last accounting year

Surplus or Deficit  
amount £

How much money has your organisation in CURRENT RESERVES?

£

How much money does your organisation hold as UNRESTRICTED RESERVES?

£

Why can the organisation’s UNRESTRICTED RESERVES not be used to fund this project? (please answer below)

If this application is successful will the grant be expended within one year of receipt?

Yes / No

### Section Six – Details of the grant amount you are requesting for this Project and how it will be used.

1 In less than 100 words, please state what this grant will be used for.

2	Please state what date the project is due to commence. <b>Remember Stratherrick and Foyers Community Trust cannot fund retrospectively, so you cannot commence your project or activity until after you receive a firm offer of grant from the Trust. You must apply in plenty of time as our application process and deadlines mean that there is a minimum period of six weeks between Grant Deadlines and Grant Meetings of the Trust Board.</b>	
<i>Project Commencement Date -</i>		
3	What is the total cost of this project?	£
4	What is the amount of grant you are requesting from Stratherrick and Foyers Community Trust	£
5	Which other funding sources have you made application to for this project, and for what amounts?	
6	When will you know the outcome of your applications to other funders?	
7	<b>COST BREAKDOWN</b> Please show the costs of the different elements of your project and how it adds up to the total sum you need.	
8	<b>FUNDING BREAKDOWN</b> Please show the different funders of your project including Stratherrick and Foyers Community Trust and demonstrate how it adds up to the total sum you require.	
9	In a few words, state how this project will benefit the community in Stratherrick and Foyers.	
10	How many people do you expect will benefit from this project?	
11	Please state what will happen if Stratherrick and Foyers Community Trust does <b>not</b> award you the grant you have requested?	

**Section Seven – Referee. Please provide your referee’s name and telephone number below**

Name Telephone Number

**Section Eight – Is there any further information you would like to provide in support of your application?  
*This could include details of the contribution volunteers will make to the project.***

**Section Nine –Checklist *Make sure you include these items with your completed application form.***

- A copy of your signed constitution or Trust Deed, or other governing document.
- A copy of your most recent annual accounts (or – for new groups a financial projection).
- A copy of your Child and Vulnerable Adults Protection Policy, if applicable
- Quotations and price lists to corroborate the project costs you have inserted.
- Other supporting information you think relevant or which has been requested by the Trust at an earlier stage.

**Section Ten – Declaration and Signature**

By signing this form below

- I certify the information contained in this application is correct and that I am authorised to make an application on behalf of my organisation.
- I understand that decisions made by Stratherrick and Foyers Community Trust are final.
- I agree to my personal details and data supplied on this form being used by Stratherrick and Foyers Community Trust and shared with the Trust’s funders, in accordance with their published Privacy Statement and Data Protection Policy, available at [www.stratherrickcommunity.org.uk](http://www.stratherrickcommunity.org.uk) .
- I understand that any grant award will be publicised by Stratherrick and Foyers Community Trust.

**Name of person signing this form (please print)**

**Signature**

**Date**

**Remember to include quotations, pricelists etc., as applicable, and any other supporting information.**

Stratherrick and Foyers Community Trust Ltd. is a company limited by guarantee,  
Registered in Scotland, SC270423 at Wildside, Whitebridge, IV2 6UN  
Funding for these Trust grants originates from community benefit payments made by  
SSE, Greencoat UK Wind and other renewable energy generators in Stratherrick.



--- End of application form ---

Please return the completed form to **The Administrator, Wildside, Whitebridge IV2 6UN** If you need help or have any questions about the grant process please contact [admin@sfctrust.org.uk](mailto:admin@sfctrust.org.uk)