

### Small Grants Scheme

##### Application Form

supported by

  Liam MacArthur MSP

*Applicants are advised to read the associated leaflet*

*to ensure they meet all the criteria to be considered.*

1. **Your Details**

**Organisation Name**

|  |
| --- |
|       |

**Project Name**

|  |
| --- |
|       |

**Contact person to whom all correspondence will be sent**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title |  | First Name |  | Surname |
|       |  |       |  |       |
|  |  |  |  |  |
| Position |  |  |  |  |
|       |
|  |
| Address:       |
| Tel:      |
| Email:      |
|  |
| **Describe briefly the main purpose of your organisation** |
|  |

**2 Your Project/Activity**

|  |
| --- |
| Please describe your project/activity. Please indicate in some detail the nature of your project including the geographical area, the number of people that will benefit and how it will meet the criteria. |
|       |

**3 Your Project/Activity Costs**

|  |  |
| --- | --- |
| 1. **The Total Cost of Your Project/Activity**  *(this total should not be more than* ***£5000****)*
 | £       |
|  |  |  |
| 1. **How much are you requesting from VAO? *(this total should not be more than £500)***
 |    |
|  |  |  |
| 1. **How much are you contributing from your own funds**
 |  | £       |
|  |  |  |
| 1. **How much is being sought/has been awarded by other funders**
 |  | £       |
| *Please give a breakdown of costs for each item/activity if possible* |  |  |
| Description |  | Amounts |
|       |  | £       |
|       |  | £       |
|       |  | £       |
|       |  | £       |
|       |  | £       |
|  |  |  |
| Total (this should be the same as a)) |  | £       |
|  |  |  |
|  |
| **When will the grant be spent?** *(it is a condition of award that the grant must be spent by 31 March 2022)* |       |
|  |  |

**Please provide the name, address and email of an independent referee who has knowledge of, or can confirm, your proposal**:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title |  | First Name |  | Surname |
|       |  |       |  |       |
|  |  |  |  |  |
| Address and email details |
|       |
|       |
|       |
|       |

**4 PREVIOUS AWARDS**

Has your organisation previously received an award from this fund Yes [ ]  No [ ]

if yes, please say when      …………………………………….

**5 ENCLOSURES**

Please ensure that you enclose the following documents with your application:

 1 Constitution [ ]

 2 Most recent Annual Accounts [ ]

*organisations who have applied previously do not have to resubmit item 1 unless it has changed significantly*

 ***ALL*** *applicants must submit item 2*

**6 SIGNATURES**

Chairperson:………………………………………………………………………. Date     ……..

Secretary: …………………………………………………………………….. Date     ……..

Please return the completed form and enclosures by **Friday 21st May 2021** to:

Voluntary Action Orkney,

Anchor Buildings, 6 Bridge Street, Kirkwall KW15 1HR

Or email to kerry.wilson@vaorkney.org.uk