Calico Community Choice: Your Voice Your Budget

Application Form:

This Application is on behalf of	Group: Individual:
Name of Organisation/Pro ject or Individual	
Contact details for project	Name: Address: Postcode: Contact number: Email:
What will your project aim to achieve?	
How do you currently raise funds?	
Have you applied and been successful for other funding? Please provide any relevant information	
How much funding are you applying for?	
Please list what you pay for (including price) with the funding	
How will you delivery the project?	
Why are you doing it?	

Who will be	
involved? Include all people who will aid in the successful delivery of the project (including any spaces you may rent/use for the project)	
Safeguarding measures	If you plan to carry out unsupervised activities with children you will need to carry out safeguarding measures, if these are already in place please provide a copy of your safeguarding policy. Please circle as appropriate. Has policy: Policy Provided. Need Support/Assistance.
Where/when will the project take place?	
How will you measure the success of the project?	
	Please note as part of funding we will require feedback about the project at 3 month intervals throughout the year which will be agreed on, should the application be successful.
Should you be successful in your application do you have a bank account for funds to be paid to?	

Return Completed documents to Customers@Calicohomes.Org.UK

