



MARLOW
TOWN COUNCIL

Community Fund

Application Form

Use this form to apply for funding from the Marlow Town Council Community Fund. Ensure all information is complete.

* Indicates required question

Organisation Details

1. Organisation Name *

2. Type of Organisation *

- ☐ Registered charity
- ☐ Club or other form of association
- ☐ School
- ☐ Other
-

3. Charity/Registration Number *

4. Registered Address *

Main Contact

5. Contact Name *

6. Role within Organisation *

7. Contact EmailAddress *

8. Telephone Number *

Project Details

9. Project Title*

10. Project Summary*

Please describe the project or initiative including its purpose, main activities and where it will take place. (max 200 words)

11. Project Start Date*

12. Project End Date*

13. Total Project Cost*

14. Grant Requested (max£1,500)*

Community Impact

Tell us how your project will benefit the local community.

15. How do you know that there is a need in the community for this project? Please share any evidence you have including lived experience, surveys, data and anecdotes. *

Please attach any supporting surveys or data files to your application.

16. Impact on Community

Describe your impact on Marlow's residents, how many people will benefit from the project and how they will benefit. Describe any other positive benefit on the town and its community. Will benefits be sustained beyond the project and if so, how?

Innovation and Creativity

17. Is there anything creative, innovative, or different from similar projects in the area and if so explain why this project is different from what has been done before. Any new approaches, ideas, or partnerships?*

Delivery

18. Please specify the total projected cost of the project, identify all sources of funding, and describe how grant funds and any additional resources will be allocated. A detailed budget breakdown for all project activities should be provided*

19. Describe your implementation or delivery plan for the project and who will be involved*

Finances

20. Please attach a copy or extract of your organisations latest annual report to the application
21. If your reserves or surplus are more than the amount of the grant you are requesting, please explain why you are making this application.

22. Name of Signatory

23. Date

24. Declaration

I confirm that I am authorised to submit this application on behalf of the organisation, that the information provided is accurate and that I have read and agree to the Terms & Conditions.

Yes ☐

If your application is successful, you will be notified by email and asked to provide your bank details so payment can be made via BACS.