

APPLICATION FOR A GRANT

SAMPLE FORM
For a Word-based document
please request via contact form

PROCEDURE

Summary Conditions

An application will be looked on favourably if the following conditions are present in an applicant:

- Is a charity,
- Is an amateur musician led musical organisation,
- Is not an Arts Council National Portfolio Organisation or in regular receipt of public sector arts funding,
- Is not-for-profit in its operations,
- Performers at concerts/events other than professional orchestra players, guest soloists or conductor are of amateur status,
- Chorali Fiscus has existing funds to support the application.

Summary Process

- Apply via web site contact form when application process is stated as Open.
- Respond to particular enquiries from the Chorali Fiscus Recorder.
- The Recorder will invite the applicant to submit a written application which may be downloaded from www.choralifiscus.org.
- The application will be evaluated by the Nominations Committee who will recommend to the trustees that a grant is awarded.
- Trustees approve the grant.
- Funds will be sent to the applicant and must be used for the purpose agreed or returned.
- The applicant is required to issue a written receipt for the funds in the name of the applicant organisation.
- The Applicant organisation is required to acknowledge the support of Chorali Fiscus in its performance programme.

APPLICATION FORM

NAME OF CHOIR OR ORGANISATION. IF A REGISTERED CHARITY STATE REGISTERED NUMBER	
NAME OF PERSON APPLYING	
CONTACT PHONE NUMBERS	
E-MAIL ADDRESS	

WEB SITE ADDRESS URL	
POSTAL ADDRESS	
ARE THERE PAID EMPLOYEES OF THE APPLICANT (Excluding honorarium)	
ANNUAL TURNOVER OF THE APPLICANT ORGANISATION	
HOW MUCH IS BEING REQUESTED	
SPECIFIC PURPOSE FOR WHICH FUNDS, IF AWARDED, WILL BE USED.	
HAVE GRANTS BEEN AWARDED FROM OTHER SOURCES IN LAST 12 MONTHS. GIVE DETAILS	
EXPLAIN HOW THESE FUNDS, IF AWARDED, WILL ADVANCE THE ENJOYMENT AND EDUCATION OF THE PUBLIC IN THE PERFORMANCE OF CHORAL AND SIMILAR CLASSICAL MUSIC	
DETAILS OF BANK TO WHICH FUNDS, IF AWARDED WILL BE SENT	Name of account Sort Code Account Number Name and address of Bank
SIGNATURE OF APPLICANT AND DATE	
NAME AND SIGNATURE OF A SUPPORTING OFFICER OF THE APPLICANT ORGANISATION AND DATE	

CHECK LIST

- All lines above completed
- Preliminary discussions via e-mail / phone undertaken with the recorder / trustees.
- Copy of latest financial accounts of applicant enclosed
- Copy of applicant organisations latest brochure enclosed
- Email this form to stephen@choralifiscus.org

Note this form will not be processed if there has been no prior dialogue with the applicant.