

Application Form

Refugee & Asylum Seeker Communities Small Grants

Name o (Group Organisa			
Contact Address (For Correspondence)			
Contact Phone No.	Home	Mobile	
E mail address			
Description and aims of your organisation What do you do? What services do you deliver? Which communities do you support?			
What would you like unding for?			
Who will benefit? How many people? (If you don't know, please estimate)		ees or asylum seekers enefit from this funding?	
Needs identified How do you know people need your project/activity?			
Difference made What difference will your project/activity make to your community? Please include how it will help your future development			

What will the funding do?

Please tick any that apply

Support Volunteering projects	
Fund ESOL/conversation classes	
Support an integration project	
Raise awareness of needs of refugees and asylum seekers	
Develop the group's capacity, e.g. room hire, volunteers	
expenses, development of the group	
Other	

Amount requested		Total (Cost of Project	
Other funding	Not needed	In place		Applied for
Budget Summary List what items you are requesting funding for. Single items over £250 require 2 quotes	Item	Amount	Item	Amount
Details of person completing form N	lame		Signature	
Position in group				
Contact details of another person in your organisation	Name: Email: Mobile: Position in Group:			

Do you have Public Liability Insurance?

IMPORTANT NOTE:

Please include the following documents with your application:

- Constitution
- Equality & Diversity policy
- Most recent annual accounts
- Safeguarding Policy

If you do not have these documents, please contact:

Debbie Royle – COI Partnership Development Coordinator,

Tel: 0115 9601230, E-mail: Debbie.royle@nottsrefugeeforum.org.uk
OR

NCVS Group Support:, Tel: 0115 9348405

E-mail: groupsupport@nottinghamcvs.co.uk





BANK DETAILS

Name of Group (Please complete)	
	er directly into your organisation's bank account. Please ensure the details ment of your grant may be affected.
Name of Bank	
Bank Address	
Post Code	
Bank Sort Code	
Account NAME to be credited	
Account NUMBER to be credited	l
Please return this form to:	Debbie Royle Partnership Development Coordinator NNRF The Sycamore Centre 33a Hungerhill Road Nottingham NG3 4NB.

Email: <u>Debbie.royle@nottsrefugeeforum.org.uk</u>