**GREENFORD AND DISTRICT SCOUT COUNCIL GRANT/LOAN REQUEST FORM**

**Charity No: 1046044**

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|  | **QUESTIONS** | **ANSWERS** |
| **1** | Name of Scout Group |  |
| **2** | For what purpose do you require the money? |  |
| **3** | Date you need the money by? Urgency? |  |
| **4** | How much do you require? Please give details of the quotes obtained and the reasons for any preferred supplier. If you have obtained less than 3 quotes please explain why. |  |
| **5** | How much of the requested sum is required as a grant as opposed to a loan?What are your reasons for this? |  |
| **6** | Have you attached your Group’s:- Latest accounts? - Trustee Report?- Independent Examiner’s Report?If not, why not? |  |
| **7** | Date the accounts filed with the Charity Commissioners? |  |
| **8** | How much money do you currently have and why can you not use this for the purpose intended? |  |
| **9** | Which grants are available and which have you applied for? |  |
| **10** | Have you applied for Gift Aid? If not, why? |  |
| **11** | How will the Group benefit from the money, if not clear? |  |
| **12** | If part of the sum is requested as a loan, what are your repayment proposals? |  |
| **13** | If you are planning building work/repairs, do you need prior approval from the landlord, the Exec, planning permission, building regs etc? What is the timescale for the works? Which areas must be vacated or activities ceased and for how long? |  |
| **14** | Are there insurance implications? |  |

* Please note that grant/loan requests should be submitted at least 10 days in advance of Greenford and District Executive meetings in order to allow committee members adequate time for consideration and further questions.
* Please be advised that no grant/loan requests will be granted for ‘revenue’ items e.g. regular bills, only for ‘capital projects’

Group Scout Leader Name: Signature:

Date:

Group Treasurer Name: Signature:

Date:

Reviewed by Greenford and District Executive Committee on Date:

Outcome:

District Chairperson Name: Signature:

Date:

District Treasurer Name: Signature:

Date: