**Lingen Davies Cancer Fund**

**Small Grants Application Form**

This form should be used to apply for grants of up to £10,000.

Please read the guidance notes that accompany this form- these will help you complete your application and ensure your proposal is within the scope of the charity’s objectives.

The Lingen Davies Cancer Fund exists for the relief of cancer patients within Shropshire and Mid Wales. We know there are a lot of ways in which patients can be supported to have the best possible experience during their treatment, and we are keen to use our small grants fund to contribute to these.

You should consider Section 8 before completing the form as this refers to how the grants outcomes will be measured. See guidance notes.

Please note- all applications must be accompanied by a signed letter of support from the applicant’s Accountable Officer. Please speak to your Accountable Officer and ensure you have their support before you start this process.

If you have any questions about the application process, or need some help with your application, please contact Louise Dawson, Operations Manager, on louise.dawson@lingendavies.co.uk

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| **SECTION 1- Applicant Details** |
| Name of Applicant: |  |
| Address: |  |
| Phone: |  |
| Email:  |  |

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| --- | --- | --- | --- |
| Expected Project Start Date |  | Expected Project End Date |  |

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| **SECTION 2- Your Proposal** |
| **What would you spend your grant on?**  |

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| **What would you spend your grant on?** |
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| **Who will benefit from your proposal? Please note that the objects of Lingen Davies are for ‘the relief wholly or mainly of cancer patients residing in Shropshire, Telford & Wrekin, and Mid Wales’. Proposals must follow this principle in order to be considered.** |
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| **Please describe the expected benefits and outcomes:**  |
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| **SECTION 3- Finance** |
| **How much funding do you need from us?** |
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| **When do you require the funding?** |
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| **Is this grant the only source of funding for this project?****If not, please detail any other sources of funding below.** |
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| **Are there any ongoing costs associated with this project? If so, please describe them below and explain how these costs will be covered.** |
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**SECTION 4 – Measuring the Outcomes and Benefits.**

**Aligning to Lingen Davies Strategic Objectives**

Please state the main Lingen Davies strategic objective to which this bid is aligned.

* **Improving Cancer prevention in our community.**
* **Enhancing cancer treatment and services locally.**
* **Support people to live well, with and beyond Cancer**

Show how you can demonstrate meeting this objective from statements you have already made in your bid.

**Statement 1:**

**Measurement 1:**

You may add additional statements and measures if you wish, however this is not a key requirement for a small grant application.

**Statement 2:**

**Measurement 2:**

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| **SECTION 5 – Agreement and Sign Off** |
| **Grant Agreement** |
| **I have read the proforma Small Grant Agreement and confirm that I will enter into this agreement on confirmation of funding.**Yes / No*Note – if you are unable to confirm this statement you should not proceed with this application.* *The grant agreement will require the signature of an executive officer in your organisation who has delegated authority to enter formal agreements.* |
| **I confirm that this application is complete and that it represents the full facts and costs of the proposal. I confirm that I have taken all reasonable steps to test any assumptions in this application.**SignedPosition:Date: |

Please email your completed application, along with quotes you have received for your project and a covering letter in support of your proposal to Louise Dawson louise.dawson@lingendavies.co.uk

We will do our best to respond to your request within 15 working days. If this is not possible, we will be in touch to let you know.

Thank you for applying for a Lingen Davies small grant!