

## IX (B) Squadron Association Grant Application Form

Contact Name for this Application:	Name of the project your applying to the Association for:
Position In Organisation:	
Address:	Daytime telephone:
	Evening Telephone:
Postcode	Mobile:
Do you have special communication	Are you part of a larger organisation: Y/N
needs or other special requirements? Please Specify:	If yes - Name of Parent Organisation:
	Do you have any of the following:
	Equal Opportunities policy Y/N
	Child Protection Policy Y/N
	Venerable people Policy Y/N
	Registered charity number

Briefly outline what the current activities of your group are:

How many people are currently involved in the running of your group? Which Geographical areas will benefit from the Association funded project? State all that apply

Employed full time	
Employed Part Time	
Support of external worker	
Committee workers	
Volunteers	
Members	
Informal Helpers	
Others	

What do you want the Association grant to fund? What are you going to do, how are you going to do it and where?

When will the project start?	Month	Year
When will the project finish?	Month	Year

How will your project Impact and deliver achievements for the public benefit?

How will your project maintain contact with past members of IX (B) Squadron?

How will your project educate and inform the general public about the work of RAF Bomber Command. Strike Command. Air Command and their subordinate formations?

How will you advertise your project and the Association's funding of it?

Will you work in partnership with other organisations in delivering this project? If so, please outline how you work together?

Why is this project needed?

How many people will benefit from the Association's grant? Who are they and how will they agin this benefit?

How will you show that your project has made a difference?

How much will your project will cost in total?..... How much do you wish from the Association?.....

Please provide a brief breakdown of costs for items /services required:

Item Description

Quote

Cost

What plans do you have for the project when the Association funding ends?

Please provide evidence of your organisation finances for the last financial year

Accounts date:

Month

Year

Total (gross) Income

Total Expenditure	£	
Surplus/deficit at the end of the year	£	
Unrestricted reserves	£	
Restricted reserves	£	
Please provide an explanation for which projects your restricted reserves are held		

Where does your organisation operate?

Any other information you wish to offer in support of your application

Signed:

Date: