**APPLICATION FOR GRANT**

**NEWARK YOUTH TRUST**

**REGISTERED CHARITY No 1042538**

(Please complete this application in black ink or typescript for photocopying purpose)

1. Full name of Applicant.

2. Address

3. Telephone No.

4. Email Address.

If this application is on behalf of an organisation or another individual, please give details below

5. Full Name of Applicant

6. Address

7. Telephone No

8. Charity Reference No (if applicable)

9. Details of Application

(Continue on a separate sheet if required)

12. Details of previous applications to the Newark Youth Trust (if applicable)

11. Please provide a detailed break-down of how the funds would be used

(Continue on a separate sheet if required)

10. Amount sought. Total £\_\_\_\_\_\_\_\_\_\_

14. Who would directly benefit from this donation?

Details

(Continue on a separate sheet if required)

13. Are you seeking this funding from anoth source or charitable trust? YES/NO

Details

15. Additional Information

15. Please enclose any further details you may feel are relevant to this application.

Details or promotional literature of your organisation (where applicable) would be welcome. Please enclose a stamped addressed envelope should you wish them to be returned.

Signed. Dated.

When you have completed the application please either: -

Email to newarkyouthtrust@gmail.com

Or post to

Newark Youth Trust
139 Farndon Road
Newark
Notts
NG24 4SP