

APPLICATION FORM FOR PROJECTS OVERSEAS 2010

All applicants must complete this form to be considered for funding

	COUNTRY: UK PARTNER IF ANY:

ORGANISATION DETAILS

1. Name of Organisation:
2. Correspondent & Title:
3. Address:
4. Tel No: Fax No:
5. Website: Email:
6. What is the nearest major town/city to your project?
7. If possible give Google Map Reference: Country:
8. How did you find out about The Hilden Charitable Fund?
9. Have you been funded by The Hilden Charitable Fund before? Yes No If yes, when?

LEGAL FORM AND GOVERNANCE

10. Please give the year your organisation was set up
11. How is your Governing Body constituted? Self Appointing/By Invitation Elected by Membership
 If a Membership organisation how many members do you have currently?
 What is the individual subscription fee?
12. How many people are on your Governing/Executive Committee
13. How is your organisation legally registered in your country?
 Please quote relevant registration number:
14. Does your registration confer tax advantages? Yes No
15. Please give the names and contact details of:
 (a) Chair of Trustees/Governing Body:
 (b) Chief Officer/Manager:

HUMAN RESOURCES

16. How many people are employed on your payroll? What is this in full time equivalents?
17. How many volunteers do you involve? What is this in full time equivalents?.....
18. If your work involves contact with children do you operate a Child Protection Policy? Yes No
 If Yes, please send details with your application.

YOUR FINANCES

19. Please give the current rate of exchange of your local currency to UK £:

20. Please give the date of your last inspected Annual Accounts and Annual Report: (please send these in)

21. From your last inspected Annual Accounts, please give the following information below:			Funding source	Give Percentage
a. Your total income			a. Sources within your country	
b. Your total expenditure			b. Funding from the UK	
c. Your current assets			c. Funding from other countries	
d. Your balance sheet funds total Please comment on your reserves/assets.			Please name your three biggest funders i) ii) iii)	

WHY DO YOU WANT GRANT AID FROM HILDEN?

22. In a few sentences, please say what your organisation does, and for what purpose you seek grant aid.

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23. Amount requested from The Hilden Charitable Fund

24. What is the grant requested from The Hilden Charitable Fund as a percentage of the project cost?

25. Is the grant for: Ongoing work Work to commence – If work is to commence, by which date do you expect the work to start?

26. How many people are likely to benefit from this grant?

REFERENCE

27. Please give the name and contact details of an agency which we can contact to ask about your work

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Please send your completed form, along with your proposal and costs with budget forecast for the agency, most recent financial statements and any other material you feel will help your case for funds (no longer than 2 sides of A4) to:

The Secretary,
The Hilden Charitable Fund,
34 North End Road,
London W14 0SH Tel/Fax 020 7603 1525