



MANX LOTTERY TRUST GRANT SCHEME

OUTLINE PROPOSAL FORM COMMUNITY AWARDS PROGRAMME

For grants between £2,501 and £50,000

SUPPORTED BY



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MANX LOTTERY TRUST GRANT SCHEME

OUTLINE PROPOSAL FORM

The outline proposal is a short form that enables us to tell you quickly whether you are eligible to apply to the Community Awards Programme and whether your project is one that the Trustees might consider funding.

We hope that this policy may save you doing a lot of work unnecessarily.

Use this form to tell us about your organisation, the project you would like us to fund, and the proposed outcomes. By outcomes we mean the changes that will happen as a result of the project.

When you have completed the form you can email us a copy and post the signed original to us.

Remember this is not an application form and when you hear from us again it will not be a decision on whether to award you a grant.

If we think your proposed project outcomes are ones that we might support, we will tell you what you need to do before you apply.

If you are not sure how to answer any questions, we will be happy to help. Please call or email using the following telephone number or e-mail address.

Please send your completed outline proposal form to:

The Grants Officer
Manx Lottery Trust
7 Auckland Terrace
Parliament Street
Ramsey, Isle of Man
IM8 1AF

Telephone: 0800 047 0036

E-mail: grants@mlt.org.im

NB: Please note that the office is manned on a part-time basis.

We update our programmes from time to time, so if you have had this form for more than three months, contact us or visit our website to check that you have the most up to date version.

We published this version in August 2020.



SECTION 1: ORGANISATION DETAILS

1. ABOUT YOUR ORGANISATION

Name of organisation

Address of organisation (this may be where the organisation is based or where activities take place) including full postcode

Email address, if applicable

Please tell us what type of organisation you are by ticking the relevant box, giving additional details where requested.

School	<input type="checkbox"/>	Type of school	<input type="text"/>
Registered charity	<input type="checkbox"/>	Charity No.	<input type="text"/>
Company	<input type="checkbox"/>	Company No.	<input type="text"/>
Parish or town council	<input type="checkbox"/>		
Community group/society	<input type="checkbox"/>		
Other	<input type="checkbox"/>	Please specify	<input type="text"/>

If you are a branch or related to a larger organisation, please tell us which one.

2. MAIN CONTACT FOR THIS APPLICATION

This must be someone from your organisation who can talk about your project and can be contacted during normal office hours.

Title

First name

Surname

Position in organisation

Home address, including postcode
(If you are applying on behalf of a statutory body, please provide your business address, including postcode, if different from address in Question 1.)

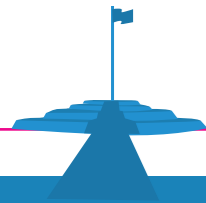
Email address, if applicable

Phone numbers

Day Evening

At least one of these should be a **landline telephone number**.

Contact address, where all correspondence will be sent (if different from the main contact's address).



SECTION 2: ABOUT THE PROJECT OR ACTIVITIES YOU ARE PLANNING

3. WHAT IS THE NAME OF YOUR PROJECT?

4. WHAT PROJECT OR ACTIVITIES WILL TAKE PLACE IF YOU RECEIVE A GRANT?

5. HOW MUCH IS YOUR PROJECT GOING TO COST AND HOW MUCH DO YOU NEED FROM THE MANX LOTTERY TRUST?

Please provide as much detail as you can.

Item or activity	A Cost	B Requested from MLT
<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Totals	£ <input type="text"/>	£ <input type="text"/>

If the total in column A is higher than the total in column B, where is the rest of the funding coming from? Please tell us if you already have this money.

6. WHAT CONTRIBUTION, IF ANY, ARE YOU MAKING TOWARDS THIS PROJECT?

This might be in cash or in kind, such as volunteer time or donations other than money, for example, equipment.

7. PROVIDE THE FOLLOWING DETAILS FROM YOUR MOST RECENT ANNUAL ACCOUNTS

Account year ending: Day/Month/Year

Total (gross) income

Total expenditure

Balance at year end

Savings (reserves, cash, investments)

All organisations that have run for one year or more must complete this question. If you have been running for less than one year, do not complete this but remember to send us a financial projection for the year when you will spend the grant.

If your savings are more than your annual expenditure, what are they for?

8. HOW MANY PEOPLE ARE INVOLVED IN RUNNING YOUR ORGANISATION?

You must have at least three unrelated people on your governing body.

Governing body Volunteers Other

If the project involves working with children, young people under the age of 18 or with vulnerable adults tick this box to confirm that you have Criminal Records Bureau clearance and up to date child protection training.



OUTLINE PROPOSAL DECLARATION

IMPORTANT – This declaration must be signed by the person named in Question 2

I confirm that the organisation named in Question 1 of this application form has authorised me to sign this outline proposal on their behalf.

I certify that the information given in this application is true and confirm that any enclosures are current, accurate and adopted or approved by our organisation.

I have not altered or deleted the original wording and structure of this application form as it was originally provided or added to it in any way.

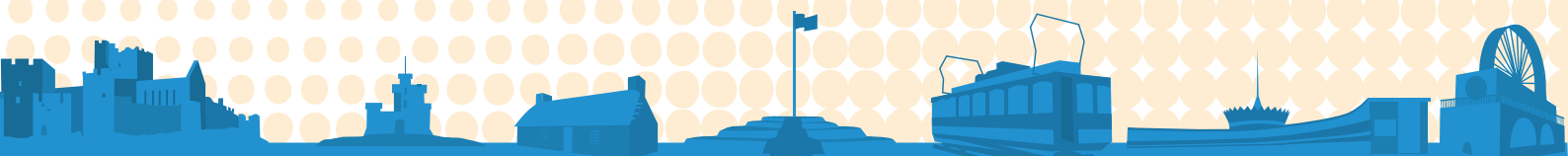
Contact

Name

Position in organisation

Signature

Date



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