

**Total Funds Required:** 

Charity Registration: #1126860

Tel: 0121 356 6155 Mob: 07958324717 Email: info@peoplesneeds.org Website: www.peoplesneeds.org

## Application form for Organisations

**Details of Organisation** 

	<del>,</del>			
Name of Organisation:				
Address:				
Telephone:				
Mobile:				
E-mail:				
Contact Name:				
Position:				
Country of Registration &				
Charity Registration Number: //				
Year of Establi <mark>shment:</mark>				
Trustee1 Details:	Name:			
	Address:			
	Contact Numb	er:		
	Email:			
Trustee2 Details:	Name:			
	Address:			
	Contact Numb	er:		
	Email:			
Copy of charity incorporation docum	ent attached? Ple	ease tick.	Yes:	No:
Other:	ds		k	
	2 Data	ile of Overviorti		
	2. Deta	ils of Organisation	on	
Please tick the category under whi	ch the project fa	lls under.		
Education			Running Expense	es
Training/Vocation			Construction	
Disaster/Relief			Environment	
Medical/Health			Income Generation	on
Welfare for poor, needy, orphans		Small/Micro Business		
Other:		<u> </u>	·	
Location of Proposed Project:				

Date Funds Required:

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Project End Date:



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Please provide detailed information regarding; [Mandatory]

4) 4: (1)
1) Aims of the project:
2) Breakdown <mark>of fund</mark> s required:
3) How exactly will the funds will be used and disseminated?
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4) Any other information which you feel will support your request

Please supply dated supporting evidence such as photographs where possible.



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Bank Name:	
Bank Address:	
Sort Code:	
Account Number:	
IBAN:	
Swift BIC:	

If overseas, please provide copy of requisition document to receive foreign funds.

## 4. Organisation's Accounts

Please provide brief details and enclose organisation's audited accounts for last three years:

## 5. Declaration

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I acknowledge that Peoples Needs UK is under a duty to protect the public funds it administers and to this end I agree it may use information provided on this form for prevention and detection of crime and it may share this information with other bodies solely for these purposes.

I hereby give consent to such collection, storage and processing of my personal data and I agree that the information given on this form may be used for data registration purposes.

I hereby certify that:

- All the information given on this form is correct to the best of our knowledge.
- All questions have been accurately and fully answered.
- If given funds, they will be used appropriately and within the legal framework of the country.
- Peoples Needs UK retains their right to withdraw existing and future support at any time and without notice
- Peoples Needs UK will not be held responsible for actions undertaken by recipients who are deemed to be unlawful.

Signed:	Date:
Full Name:	Position:
Address:	

Official Stamp: