

WARWICK TOWN COUNCIL



COUNCILLORS FUNDING APPLICATION

This form must be completed by the supporting Town Councillor, and submitted at the same time as the grant application form, to indicate their support of the application

Section 1: Application Details	
Name of Organisation	
Project / Event	
Amount Requested	
Application Received Date	

Section 2: Does the Application;	
Improve services for under 18's or the elderly?	
Include public involvement?	
Offer equal opportunities?	
Cover a deprived area in Warwick?	

Section 3: Previous Applications	
Has the group / organisation previously applied for funding from Warwick Town Council?	
If yes, please give details of their previous application – date of application, amount requested, project / event, was their application successful?	

I support this grant application and will attend the upcoming Committee Meeting to represent this application and answer any questions that may arise

Name of Councillor

Signature

Date