



Dartford Borough Council Salute to Youth Scheme

Nomination Form

1. Contact Details:

a) What is the name of your organisation?

b) Who is the contact person at your organisation?

c) Address:

d) Telephone No: (day)

e) Telephone No: (evening)

f) Email:

2. Tell us about your organisation/group:		
 a) Is your organisation predominantly dedicated to provid young people? 	ing service with and for YES/NO	
b) What type of organisation are you:		
Charity	YES/NO	
Company Limited by Guarantee	YES/NO	
Constituted Voluntary Organisation/Group Other (please specify)	YES/NO	
Charity or Company Registration Number:		
c) Please briefly describe the main purpose and the activities of your		
organisation:		
d) For how many years has your organisation been delivering services to young people in Dartford?		





3. Tell	us about your project:
a)	Where will the project take place?
b)	When will the project take place?
,	Are the benefactors of this project predominantly young people aged $5 - 25$ year olds and residents of Dartford Borough?
d)	Please give a brief outline of your project.
4 Ein	ancial Details:
a)	What is the total expected cost your project?
b)	How much do you need from Dartford Borough Council's Salute to Youth Scheme?
c)	Please provide us with a breakdown of how this grant will be spent – only
	one-off capital expenditure is eligible (e.g. equipment, minor building repairs etc). <i>Please note you will be required to provide evidence of this spend upon</i>
	completion of the project.

d) Please give the name of the Bank Account and details to which you would like payment to be sent? (Should be the same as the official name of the organisation) **Please attach your audited accounts for the last year.**





Declaration

- I certify to the best of my knowledge that the information provided on the form is correct.
- I agree to spend the award from the *Dartford Borough Council Salute to Youth Scheme* on the elements of the project stated in this nomination form.
- I will provide receipts as proof of expenditure and agree to complete an evaluation form.

a) Signed (authorised to sign on behalf of the organisation):

b) Name:

c) Date:

Please send the completed nomination form and a copy of your last audited accounts to: grants@dartford.gov.uk Don't forget to take a copy for your own records!

FOR OFFICIAL USE ONLY:

Date received:

Officer dealing with nomination:

DATA PROTECTION -. We will collect and use your personal information to administer our grants service process.

Our **lawful basis** for processing your personal information is that it is necessary for the performance of a task in the public interest or in the exercise of official authority vested in us pursuant to section 137 Local Government Act 1972 (where there is a direct benefit to the area or part of the area or to some or all of the inhabitants and provided there is no alternative power whether limited or conditional or not and no statutory prohibition to the use of this power) or section 19 Local Government (Miscellaneous Provisions) Act 1976 or section 2 Localism Act 2011.

Dartford Borough Council, Civic Centre, Home Gardens, Dartford, Kent DA1 1DR is the Data Controller <u>dataprotection@dartford.gov.uk</u>

Please refer to our <u>Corporate Privacy Notice</u> and the <u>Privacy Notice for the</u> <u>Grants Service</u> for further details of how we process your personal information and your rights.