Angel Heart And Soul Foundation Charity Fund / Grant Application Form

SECTION A: ABOUT YOUR ORGANIZATION

Details			
Organization Name			
Main Contact's Name			
Post Held in Organization			
Address			
Postcode			
Main contact telephone number			
E-mail address			
Website			
How would you describe your o	organization? Chec	k one box in each section B. Area Covered	
Voluntary Organization		Local Community	
School/college/University		County	
Registered Charity(Including registration number)		Regional	
Other (please state)		All USA / CANADA	
		Overseas	

Organization background		
When was your organization founded?		
How many paid staff does your organization employ	Full Time:	Part time:
How many volunteers help each year?	Full Time:	Part Time:
How many beneficiaries does you	r organization help in a yea	ır?
Please give a summary of your org	ganization's main aims and	activities.
indicate the percentage of your fur		audited accounts, please d administration costs (This
indicate the percentage of your fur helps us ascertain how much per pursuit of charitable activities) Year ended	ndraising, management an	d administration costs. (This
helps us ascertain how much per pursuit of charitable activities)	ndraising, management an	d administration costs. (This
helps us ascertain how much per pursuit of charitable activities) Year ended	ndraising, management an \$1 received by your charity	d administration costs. (This
helps us ascertain how much per pursuit of charitable activities) Year ended Total Income:	ndraising, management an \$1 received by your charity ndraising:	d administration costs. (This y/organization is used in the
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helps us ascertain how much per pursuit of charitable activities) Year ended Total Income: Percentage of income spent on full Percentage of income spent on materials.	ndraising, management an \$1 received by your charity ndraising: anagement and administra aritable activities	d administration costs. (This y/organization is used in the
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SECTION B: INFORMATION ABOUT YOUR PROJECT

Am	That is the total amount of fundinarity Fund for this project? mount sought per annum? ver what time period would you				dation
Am	harity Fund for this project? mount sought per annum?				dation
Ov		u require this po	otential fu	unding?	
	ver what time period would you	u require this po	otential fu	unding?	
	ver what time period would you	u require this po	otential fu	unding?	
Wh					
	hat is the project's entire durati	ion?			
Ple	ease provide details about the	people who wi	ill benefit	from this application	n:
	ow many individual people will on this grant?	directly benefit	t		
Wł	hich age range do the majority	/ of beneficiarie	es who wi	II directly benefit fro	m the grant belong
	0-15			35-50	
	16-25			50-65	
	26-34			65 +	
Но	ow many beneficiaries are con	sidered to be fr	rom disac	lvantaged/vulnerabl	le backgrounds?
Но	ow and in what way are they m	nore disadvants	aged/vuln	erable?	

	Please explain what the funding will be used for, including an explanation of the activities that the project will undertake
,	What positive difference do you hope to achieve for the beneficiaries of this project?
	How will you measure whether the project has achieved this?

16.	When will the project commence? (Please give approximate dates)			
17.	What is the name of the person/s responsible for managing this project, if different to the person/s applying? (Please include their Titles)			
26.	Which other organizations/funders (include government funding)?	have you applied to for su	pporting this project	
	Organization Name	Amount	Result? (Y/N/Pending)	
	If 'YES' please confirm their involve	ement:		

27. Please provide named, contact details for all partners or organizations you will be working with to develop and/or deliver the project for which you are requesting support

(Please copy the box below and complete for all partners/organizations involved in the development & delivery of this project)

Partner/Organization Name	
Named Contact	
Post Held in Organization/ & function within project development or delivery	
Address	
Postcode	
Main contact telephone number	
E-mail address	
Website	

28. Please attach a **FULL** budget for the project for which you are seeking support, even if you are only seeking part-funding. This must include a quarterly breakdown of the financial requirements. You **must** also highlight clearly which activity project area(s) require a contribution from the Angel Heart and Soul Foundation Charity Fund.

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SE	CTION C: CHECKLIST (Please til	ck as appropriate)	
	I have included a copy of our most rece	ent audited accounts	
	I have attached a copy of the full cost/b	oudget for the project	
	 I have included a copy of the marketing for this project (if appropriate) 	g and communications plan	
	I have included a copy of our constitution	on/governing document	
	 I have included a copy of our Child Pro project for which you require Angel Hea or concerns minors) 		rity Fund funding includes
29.	STATEMENT		_
	The applying organisation agrees to the A Conditions of Grant Awards criteria. We use Angel Heart And Soul Foundation to make of our knowledge the information referred	nderstand that it may be ned a presentation or supply fur	essary to appear before ther information. To the best
	Note: Your application cannot be assessed completed, the form is signed and all supp	-	on this form have been
	Signed on behalf of the applicant organization mentioned below		
	Name (please print)		
	Position		
	Organization		
	Date		
	I have read and understood the Angel Hea	art And Soul Foundation Cha	rity Fund Terms &
	Applications cannot be considered until a any enclosures is received by the before		
	Documentation should be sent to: Angel Heart And Soul Foundation Char 15 Buddtown Rd Southampton NJ, 08088	ity Fund	

TERMS AND CONDITIONS OF GRANT AWARDS

- Your organization must be a registered charity, a voluntary group, associations, social housing association, local authority, statutory organization, academic body or a recognizable and accountable good cause.
- 2. Grants can only be used for the purpose(s) for which they are awarded and should not be used for any other purpose without the Angel Heart and Soul Foundation's prior approval.
- 3. Grants awarded must not be given or transferred to any third party but must be used solely by the organization to which it was awarded. If the grant is used for a purpose not outlined in the application, we reserve the right to ask for any monies or equipment granted by the Angel Heart and Soul Foundation to be returned.
- 4. If our offer of a grant has not been accepted within twelve months of the date of our approval the grant offer will automatically lapse and be rescinded and you will have to re-apply.
- 5. You will take reasonable care to ensure that the project is conducted in a professional, safe and proper manner and in accordance with best practice and current law. In providing funding support Angel Heart and Soul Foundation does not accept any responsibility or liability for the project.
- 6. Grants will be paid either by check or direct credit transfer in one lump sum upon approval. If the award duration exceeds one year the grant will be paid annually in agreed staged tranches. The Angel Heart and Soul Foundation will consider funding tranches for the duration of projects of less than one year where appropriate.
- 7. Grants are awarded on an individual application basis therefore repeat funding should not be expected, or planned.
- 8. Your organization must start to draw down and spend the grant within 12 months of it being awarded. In exceptional circumstances, delays may be agreed in writing with the Angel Heart and Soul Foundation. Failure to draw down the grant within the time specified will result in the grant offer being rescinded. Any rescinded grants may be reapplied for at a later date.
- 9. The Angel Heart and Soul Foundation and contribution to the project must be appropriately acknowledged on all promotional media in relation to this project. Failure to adhere to the agreed promotional plan, or our brand guidelines, may result in the grant offer being revoked and any monies awarded reclaimed by the Angel Heart and Soul Foundation. Copies of all promotional media and any feedback must be forwarded to the Angel Heart and Soul Foundation periodically as part of the reporting process.
- 10. By agreeing to the terms and conditions of any grant award you agree that all and any photos, video material, case studies and other material supplied by your organization can be used by Angel Heart and Soul Foundation in its activities.
- 11. The Angel Heart and Soul Foundation retains the right to monitor and audit the project throughout its development and implementation. In accepting the grant offer you agree to provide reports to the Angel Heart and Soul Foundation at agreed intervals and/or on request and certainly at the termination of the project.
 - We reserve the right to revoke any Angel Heart and Soul Foundation Charity Fund grant offer and to pursue the return of any grant monies or equipment if it is found out that your organization has provided false information or has not adhered to the terms and conditions of acceptance.
- 12. The Angel Heart and Soul Foundation accepts no liability for any actions undertaken by any party in relation to the awarding of any funding, or support.

Signed on behalf of the organization mentioned below	
Name (please print)	
Position	
Organization Date	

Please send your completed form to:-

Angel Heart And Soul Foundation 15 Buddtown Rd

Southampton NJ 08088 USA