



GRANT AID REQUEST FORM

Name of organisation _____

Contact Name _____

Tel No _____

Address _____

Email _____

How much of a grant are you seeking?

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Please provide details of the project this grant will support

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Who will be the beneficiary of this grant? (Please give full name and address)

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How will this grant be used?

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What impact will this grant make to your organisation?

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What are the timescales of this project?

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PLEASE PROVIDE ANY FURTHER DETAILS AND VISUALS IN SUPPORT OF YOUR APPLICATION AND ATTACH TO THIS DOCUMENT.

Thank you for your request which will be passed to the Trustees of Women in Wales and will be considered in line with criteria guidelines used.

Name of person applying for grant

Signature

Date