Allander Youth Activities Charitable Trust

(founded by Alec J Spalding MBE in 2005) Scottish Charity Number - SC 036882

2024 - Grant Application Form

1. Name of body making	g the application (e.g. 24th (Glasgow Scouts)			
Scottish Charity Number (if applicable) SC					
Has this body received fu	Has this body received funding from the Trust before? Yes / No				
If YES please state:-	Year	Amount of grant £			
Reference number of gra	nt if known/				
2. Purpose of application	(including details of travel and	accommodation if appropriate)			
3 How many young ned	ople will benefit from this	s financial assistance?			
Age range 4 to 8	Age range 10½ to 14				
Age range 8 to 10½	Age range 14 to 17	Total			
Note:- grants are only availai	ble in respect of those under 18				
4. Detail of costs involved					
l otal costs split between ma	Total costs split between main components e.g., food, accommodation, travel, activities & equipment				
Will any part of these costs be met from elsewhere? Yes / No					
If YES please state amou	£				
	110				
and source(s)					
5. How much are you applying for?		Amount £			
6. Outline timetable for	expenditure and when f	unding would be required			
Date activity is due to take place					
Date funding required (See - Applying for a Grant 2024)					

2024 Grant Application Form (continued)

7. Details of person making the application					
	Name				
	Address				
Post Code.					
	E-mail				
	Position in Applicant Bo	ody			
	I confirm, the activities for which funding has been requested will be carried out under the supervision of suitably qualified persons and that insurance cover is in place where appropriate. I acknowledge how information provided on this form may be used as detailed in the note Applying for a Grant (2024)				
	Signature		Date		
8.	8. Supporting signature				
	Name				
	Position				
	E-mail	Telephone			
	suitably qualified person	ctivities for which funding has been requested will be carried out under the supervision of d persons and that insurance cover is in place where appropriate. I acknowledge how wided on this form may be used as detailed in the note Applying for a Grant (2024)			
	Signature		Date		
9. Applicant's Bank details					
	Bank Name		Sort Code		
	Bank Address				
			Account Name		
			Account Number		
A copy Pay-in-Slip must be attached for the above account to enable us to set up your details with our Bank. (Not required if you applied in the last two years unless the details have changed.)					
		For Trust	use only		
R	Received		Bank details checked		
	cknowledged		Reconfirm application Yes /No		
	ogged		Set up payment		
	Considered		Second approval		
	pplicant advised) / / / / / / / / / / / / / / / / / / /	Payment notice sent		
ΙP	av in slip required	Yes/No	Paid		