



SWCC Grant Application Form

Name of Applicant:

Office Ref:

Grant Applied for:

Grant Ref:

To improve animal welfare and the conservation of British fauna and flora.

To improve animal welfare and conservation of fauna and flora of endangered species around the world.

To educate the general public about British fauna and flora, endangered species around the world and the local environment.

Project Title:

For office use only

Date received:

Grant Approved ?

Yes No

Further information requested?

Yes No

(Please see notes before filling in this form)

Section One: Personal Details

Principal Applicant Name:



Post Held:
Address:

Postcode:
Telephone Number:
Email Address

Section Two: Proposal Summary

Project Title:

Approximate Cost (£'s):
Proposed Start Date:

Duration:

Summary of Proposed Study (*500 words max*):





Section Three: Details of Costs

1) Details of Cost

Item	1st Year Cost £	2nd Year Cost £	3rd Year Cost £	Total Over Period £	Comments
Staff					
Equipment					
Consumables, Expenses and Other Costs					
Overheads					
TOTAL COST					





Section Four: Further Financial Information

Have you previously applied for a grant from SWCC? Yes No

If yes, please give details here:

Are you applying to any other funding resources in respect of this project? Yes No

If yes, please give details here:

Please list any current grants held by the applicants:



Please ensure that you have completed all required sections of this form and included other documentation as requested by SWCC.

Declarations :

I have read the terms and conditions under which grants are awarded and, if a grant is made, agree to abide them. To the best of my knowledge and beliefs all information contained in this application is accurate and complete.

Signature of Principle Applicant:

Date:

I have read the terms and conditions under which grants are awarded and, if a grant is made, agree to abide them. I confirm that I have read and support this application, that I agree to this research being undertaken in my department, and that all necessary licences and approvals have been or are being obtained.

Signature of Head of Department:

Date:

If a grant is made I will ensure that the funds provided are used for the purpose for which they have been given. I confirm that it is the institution's intention to maintain its support for the department of the applicant(s) during the period for which this grant is requested. I also confirm that I have read and I accept for and on behalf of the Institution the conditions under which grants are awarded.

Signature of Finance Officer:

Date: