**Love Norfolk Transforming Communities Fund**

Expression of Interest

*Please note that this form must be submitted together with your latest Annual Accounts. Please read the full guidance for the Love Norfolk Transforming Communities Fund before completing this form.*

**Contact information**

|  |  |  |  |
| --- | --- | --- | --- |
| *Name of organisation* | | | |
| *Legal status of organisation* | | *Registered number (if applicable)* | |
| *Contact name and position* | | | |
| *Correspondence address* | | | |
| *Daytime tel* | *Email* | | *Website* |

**About your organisation**

*Briefly describe the main activities of your organisation (100 words)*

|  |
| --- |
|  |

|  |  |
| --- | --- |
| *Date your organisation started* |  |

|  |  |
| --- | --- |
| *Income for your last financial year* | £ |

|  |  |
| --- | --- |
| Approximate grant amount being requested | £ |

**Your project**

Area/s that your projects will benefit (please put a cross [x] next to all relevant options)

|  |  |  |  |
| --- | --- | --- | --- |
|  | *North Norfolk* |  | *Broadland* |
|  | *Great Yarmouth* |  | *Breckland* |
|  | *South Norfolk* |  | *King’s Lynn & West Norfolk* |
|  | *Norwich* |  |  |

|  |  |
| --- | --- |
| If your project has a specific start date enter here |  |

*Please describe the project and its outcomes:*

|  |
| --- |
| *What is the need that your project aims to address (100 words)* |
| *How will your proposed project address this? (150 words)* |
| *How would the requested grant be spent? (150 words)  If the grant requested will not cover the full cost, explain how the remainder will be covered* |

|  |
| --- |
| *Tell us what difference the project will make (150 words)* |
| *Tell us how this difference will be sustained after the funding has ended (100 words)* |

*Please give the details of a person outside your organisation who will be prepared to talk with a member of the panel about the quality of the work you do.*

|  |  |
| --- | --- |
| *Name* | *Daytime tel* |
| *Email address* | |
| *Relationship to the organisation applying* | |

*Please ensure that you have completed these actions before submitting:   
1. Read and understood the guidance for this funding, and discussed your proposal with a Grants Officer*

*2. Ensured that all necessary governance is in place to meet NCF eligibility criteria and can be evidenced upon request*

*3. A full business/ project plan and budget can be provided if the proposal is shortlisted*

*By submitting this form you agree to allow Norfolk Community Foundation to retain the personal and organisational data you provide on our database. This information will be used to help review and assess your application in association with the appointed panel, to administer and monitor any grant awarded, and as part of any publicity or other grant related activity undertaken by Norfolk Community Foundation.*

***Please submit all documents by email to*** [***grants@norfolkfoundation.com***](mailto:grants@norfolkfoundation.com)