

# APPLICATION FORM

## COMMUNITY SPORT DEVELOPMENT GRANT



Organisation Details	
Name of Club/Group/Organisation:	
Name of Lead Applicant:	
Address:	
	Post code:
Email:	Phone:

About Your Project	
<b>What is the focus of your project?</b> (Tick appropriate box/es)	
<input type="checkbox"/>	Hosting/organising/co-ordinating coach education course/workshop
<input type="checkbox"/>	Coach mentoring
<input type="checkbox"/>	Coach development project
<input type="checkbox"/>	Officiating
<input type="checkbox"/>	Committee Development
<input type="checkbox"/>	Other
Project overview ( <b>please note from the guidance notes where priority will be given and include as appropriate</b> ):	
Dates:	Number of participants:

Who will be the project beneficiaries? (Tick appropriate box)	
<input type="checkbox"/>	Coaches
<input type="checkbox"/>	Whole club
<input type="checkbox"/>	Partnership of clubs
<input type="checkbox"/>	Community
<input type="checkbox"/>	Other (please provide details)
<b>Please tell us about the difference your project will make to your group and also the people in your local area? (Tick appropriate box)</b>	
<input type="checkbox"/>	More opportunities
<input type="checkbox"/>	Better quality opportunities
<input type="checkbox"/>	Better quality coaches
<input type="checkbox"/>	Better quality club
<input type="checkbox"/>	Improve partnership
<input type="checkbox"/>	Developing local people
<input type="checkbox"/>	Developing positive role models
<input type="checkbox"/>	Meets local needs
<input type="checkbox"/>	Other (please detail)

