

**2020 BANG Covid- 19 Funding Application sponsored by National Lottery Awards for All Funding**

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| --- | --- |
| Date Application Made  |  |

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| --- | --- |
| Name of Main Contact ( legal Guardian) |  |

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| --- | --- |
| BANG Member: |  |

|  |  |
| --- | --- |
|  Home Address and Postcode  |  |

|  |  |
| --- | --- |
| Telephone Number: |  |

|  |  |
| --- | --- |
| E mail Address : |  |

|  |  |
| --- | --- |
| Child Applicants Name  |  |

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| --- | --- |
|  Branching Out Youth Application |  |

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| --- | --- |
| Brief Summary of Additional Need or social need |  |

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| Does Child reside at main applicants address please Circle  |  Yes No  |

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| --- | --- |
| Purpose of the Grant ( max 50 words) |  |

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| Tell us briefly how this funding will make a difference to you child and family  |  |

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| --- | --- |
| Item and Cost Total cost : £ |  |

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| --- | --- |
| Signature of Main Person applying for the Grant |  |

NB: This form will act as a formal agreement to receiving funding.

 **Please Note : Borders Additional Needs Group will distribute vouchers in the name of the main applicant**

**Terms and conditions**

* BANG Covid-19 Grant are intended to help children that are experiencing temporary home-schooling difficulties, aim of the grant is to provide Sensory Toys and Books.
* The Grant can be used to support BANG Youths accessing the new Branching our Project, please indicate this on the form. Tablets can be purchased average price - £70-£80
* The Grant is not to be considered for other financial Hardships; BANG will signpost you to other funding support.
* The grant must only be used for the purposes set out in the funding application
* If you successful Borders Additional Needs group SCIO will Release voucher or Order you goods for your applicant and sent to your home address.
* Main applicant when signing the form agrees to the terms and conditions of the grant
* Main applicant must retain receipt of purchase and complete a funding evaluation form within one month of receiving the Grant
* Grant Decisions will be made by Two BANG Board members and agreed

If you require help to complete the form please contact BANG to Pauline Grigor CEO Paulinegrigor@tiscali.co.uk or Nicola Corbet BANG Secretary :bangsecretary@gmial.com

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| --- | --- |
| Date Form received : |  |

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| --- | --- | --- |
| Agreed By Board members please sign : | BANG Board signature: | Bang Board Signature: |

|  |  |
| --- | --- |
| Date funding released : |  |

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| --- | --- |
| Grant sent to home |  |

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| BANG order Goods |  |

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| --- | --- |
| BANG confirmation of order and dates |  |