

## Grant Application Form

Version 01

We want applications which show clearly what is wanted, why it is wanted and what difference it will make. This sounds simple but many applications do not tell us these things. We then use our time and yours trying to find them out. So before completing this form please read:

- The relevant FAQs section
- the example application forms

Then help us by answering all the questions on the form.

Name of Young Person applying for grant

Name of agency or organisation which is responsible for the Young Person or is sponsoring his/her application

Contact person

Contact details

Email

Tel/Mob

Is the Young Person in care?

If Yes, please state the name of their foster carer and the organisation fostered through

If No, please state who was their care authority and when they left care

Amount of money needed. Grants are usually up to £600 but, in exceptional circumstances, applications for larger amounts will be considered

£

If a Grant is approved, please state the name the cheque is to be made payable to (for those under the age of 18 we would expect this to be the foster carer)

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**What do you want?** Please give details of what you want to buy.

**How much will it cost?** Please state exactly how much the items or activities will cost and the source of the cost eg Argos, Carpetright. Please attach hyperlinks or copies of quotes. If you do not have the exact costs please provide estimates and explain the source of the estimate.

The questions below help us to understand whether contributions are being made by other people or why there is no other source of funding.

Who else will contribute?	No	Yes	How much will the contribution be? or Why there is no contribution
Foster Carer			
Young Person			
Pupil Premium			
Local Authority			Please explain how much the Leaving Care grant was and how it has been used if items for setting up home are being requested
Other, please list			

If you need more space please continue on a separate sheet.

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**Background Information** Please give whatever additional information about the Young Person you think will help us to reach a decision. In particular, please explain what difference having the grant will make. If you need more space please continue on a separate sheet.

**Signed** Carer/social worker/leaving care team (delete as appropriate)

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**Date**

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**Monitoring Data** Please complete the table below for the young person. The data is used to help us understand who we give grants to and does **not** influence whether we give a grant.

Age		Gender	
Ethnicity		Nationality	
Disability, if any			

**How did you hear of The Spark Foundation?** Please tick all which apply

Search Engine	
Previously used	
Recommendation from friend/social worker	
Other, please specify	

**Please return completed form to:** [admin@sparkfoundation.org.uk](mailto:admin@sparkfoundation.org.uk) or by post to The Spark Foundation, Highbank House, Stockers Hill, Sittingbourne Kent ME10 3EG