

Official use only:

D&S No: \_\_\_\_\_

Date: \_\_\_\_\_



## **Application form for Donations and Sponsorship Committee**

The Donations and Sponsorship Committee was set-up by the Board of Directors of Derry Credit Union Limited in March 1998. It consists of seven members of the Credit Union who have the responsibility of examining applications and the allocation of donations. The committee is ultimately responsible to the Board of the Credit Union. The maximum fund available for distribution by the committee is allocated at the Annual General Meeting. Committee meetings are usually held on the first Saturday of January, March, May, July, September and November. **Completed forms should be returned 2 weeks prior to the scheduled meetings listed above.**

<b>Name of Group or Individual:</b>		
<b>Type of Organisation:</b>	<b>Limited Company / Voluntary/ Community Group / Fundraising Group</b> <i>Choose from options above:</i>	
<b>Principal Officers (e.g. Chair, Treasurer)</b>		
<b>Contact Name:</b>		
<b>Address:</b>		
<b>Postcode:</b>		
<b>Contact Number (s):</b>		
<b>Email Address:</b>		<b>Social Media platforms (website, Facebook, twitter etc):</b>
<b>Are you a member of Derry Credit Union Limited</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>If No, which Credit Union are you a member of (if any):</b>

<b>Title of Project:</b>	
<b>Aims of Project:</b> <i>Please include as much detail as possible (you may also include additional paperwork in support of your application).</i>	

<b>Specific Use of Donations:</b>		
<b>Overall Cost of Project:</b>		
<b>What amount do you request from Derry Credit Union:</b>		
<b>Have you previously received money from Derry Credit Union?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, please provide details:
<b>Is this a one-off request or how often will it be repeated?</b>	<b>One off / 6 Months / Annually / Two Years / Will depend on Project</b> <i>Choose from options above:</i>	
<b>How many of the same applications have you made to other bodies?</b>		<b>What amount of monies have you received from other funding bodies?</b>
<b>Who will benefit from donation?</b>		
<b>What age group will benefit?</b>		<b>How many will benefit?</b>
<b>Date by which donation is required?</b>		
<b>Name of organisation the cheque should be made payable:</b>		
<b>How will you publicise any support received from Derry Credit Union?</b>		

**Declaration:**

I confirm that the information given is correct, to the best of my knowledge, and that any money received will be used for the sole purpose stated in the application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***A signed hard-copy form must be returned to our office at least two weeks prior to the committee meeting.***

**For official use only:** Unsuccessful  Successful  Amount Allocated: £ \_\_\_\_\_

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Completed forms should be returned to:**

The Donations & Sponsorship Committee, Derry Credit Union Limited, Head Office, 7-9 Abbey Street, Derry, BT48 9DN or by email to [info@derrycu.com](mailto:info@derrycu.com).

***Please visit our website @derrycu.com to view our privacy notice for full details of how we process your information.***

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