



Friends of Staffordshire's
Young Musicians

Registered Charity No: 1037650

Friends of Staffordshire's Young Musicians

FOSYM

**Application form for
Financial Grant - Music Centres**

APPROVED VERSION V1.0

October 2019

Section 1: Details of Centre

Music Centre		Centre Manager	
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Address for correspondence	
Riverway Centre. Riverway	
Stafford	
Postcode:	ST16 3TH

Please enter your contact number(s) and e-mail address so that we can contact you

Contact telephone number:	
E-mail address:	

Section 2: Details of Your Request for a Grant

This is where you should write full details of your request for funding – please remember that the Trustees need as much as information as possible to help them make decisions. If you are not sure then discuss with your line manager first

- Examples of FOSYM support for Music Centres applications:
Fees and costs for individual pupils, cost of projects and workshops, support for residential courses, specialist instruments, joint applications for funding, awards for specific events
- Examples of when the Music Centre should apply to the Music Service:
photocopying, music, instruments for general use, concerts, general staff costs, general administration
joint applications for funding

Your comments **MUST INCLUDE:**

- Date of activity if applicable
- How will this project further FOSYM's aims (i) to widen access to musical education and/or (ii) to support excellence in musical education?
- What would happen (or not happen) without FOSYM support

Enter the total cost of your project/activity/resource request below

How much are you applying for from FOSYM?:

If applicable how will the balance be raised and by when?

If applicable - have you already raised the balance? Yes No

Important - We will not be able to pay the grant until the balance has been raised or secured and applications asking for immediate funding in these circumstances will not normally be considered.

If applicable: In the event that your application is successful, will you be holding any kind of publicity event?

 Yes No

If you are, please describe your event.

Section 3:Your Manager:

FOSYM requests that all applications are supported by a senior manager who can vouch for your application. Please ask your manager to comment on your application and why your centre should receive grant funding for the activity specified in the application.

Name of Manager	
Comments by Manager	
Signed	Date

Section 4: Certification

I/We certify that the project details given in sections 1- 3 are correct and that the proposed grant will be spent on that project/activity.

We undertake with the Trustees of FOSYM that if a grant is made towards the activity as outlined, the applicant will comply fully with all the conditions set out in the Rules & General Conditions and any other special conditions that the Trustees deem necessary to set down.

1: Applicant Name (please print)

Date
