

APPLICATION SUMMARY SHEET
(to be completed by all applicants)

Registered Charity No.: 1153514

Organisation Name:	Date of Application (DD/MM/YYYY):
	Registered Charity No.:
Contact Postal Address:	Website:
	Tel No.:
	Email Address:
Contact Details of Sponsor:	
Name:	Role:
Geographical Location of Project or Beneficiaries:	
Please provide a summary of your application including the purpose for which funding is requested:	
Please indicate if you require	<input type="checkbox"/> Single Donation
	<input type="checkbox"/> 3 year series of regular payments
	<input type="checkbox"/> Ongoing funding for a special project
Expand:	
Total Amount Requested:	Start Date of Project/Work to be funded(DD/MM/YYYY):
Have you applied to The Gisela Graham Foundation before? NO / YES (if yes, please give date and outcome of last application)	