



THE LEVENS GARTH (HOLDINGS) GROUP



PROJECT FUNDING

APPLICATION FORM



THE LEVENS GARTH (HOLDINGS) GROUP
North Suite 2, Town Mills, Rue Du Pre, St. Peter Port, Guernsey, GY1 1LT
Tel: +44 7342 580875
Email: info@levensgarthgroup.com
Website: www.levensgarthgroup.com

PROJECT FUNDING APPLICATION FORM 2024

ORGANIZATION INFORMATION

Organization Name: _____

Type of Organization: _____

NGO OTHER _____

Vision and Mission Statement:

Address:

Telephone Numbers:

WORK HOME MOBILE

Email Address:

History and Purpose of the Organization:

Personnel Details:

Number of full-time employees Number of full-time volunteers

Services Offered by the organization:

PROJECT FUNDING REQUEST

Title of Proposed Project:

Background and need for Funding: (Describe the opportunity or issue your organization aims to address with this funding)

Objectives and Goals: (Specify the intended outcomes, services, or products resulting from this funding.)

Funding Categories

- Grant Funding from \$ 50,000.00 - \$ 100,000.00.
- Grant Funding from \$ 100,000.00 - \$ 500,000.00.
- Grant Funding from \$ 500,000.00 - \$ 1,000,000.00.
- Grant Funding from \$ 1,000,000.00 - \$ 5,000,000.00.
- Grant Funding from \$ 5,000,000.00 and above.

BUDGET AND FINANCIAL PLAN

Project Activities & Timeline:

(Detail the planned activities, their timeframe, and associated budgets.)

Activity	Budget	Period
Total Funding Amount Required:		

**Additional Information
Further Justification**

(Please provide any further information or explanation to support your funding application.)

Supporting Documents Checklist

(Please provide any further information or explanation that you think is required in support of your application for this funding)

- Project Work Plan.
- Budget Breakdown.
- Organizational Chart including Board Directors.
- Copy of your current Certificate of Registration.
- Organization Banking Details

DECLARATION

I, _____ declare that I am authorized to submit this application on behalf of myself or the applying organization. I confirm the following;

1. All information provided in this application and its supporting materials is accurate. I understand that any misleading or inaccurate information may result in the termination of the funding process by the Levens Garth (Holdings) Group and its partners.
2. The organisation is a non profit entity.
3. The organisation is currently operational.
4. Additional information may be requested by the funding agency to assess this application. Failure to provide requested information may result in the application not being assessed.
5. Summary information about the application and any resulting grant (including applicant name, purpose of the grant and level of funding) may be stored by The Levens Garth (Holdings) Group's data center for a limited period.
6. I have the authority to commit the applicant to this application/contract.
7. The assessment of applications is subjective and a matched funding agency is the final decision-making authority.
8. If successful, I agree to enter into a Funding Release Agreement with the matched Funding Agency.

Signature

Date

IMPORTANT NOTES

1. You can include additional pages to support your Funding Sourcing Application. Please ensure these pages are numbered and have your Organisation's name at the top of each page.
2. Please seek the eligibility criteria and the Funding requirements from our Agents or website to ensure you comply with the requirements. Applications that do not meet the criteria or are incomplete will not be assessed.
3. All applications will be sent an acknowledgement email within 24 hours of your application being received by The Levens Garth (Holdings) Group's Sourcing Department.
4. Please allow up to 72 hours from submitting your application. All applicants will be advised of the outcome of their application whether successful or not successful within 3 working days.
5. This Form Should be submitted ONLY if the Applicant is willing and able to pay a Grant(Funding) Sourcing fee of 450-UK Pounds upon confirmation of an available matching Funding and at the signing of the Funding Sourcing Agreement.

SUBMISSION INFORMATION

Completed sourcing applications may be submitted in either hard copy or electronic copy to:

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CONTACT PERSON'S INFORMATION

Full Name:		
Nationality:	Sex:	Date of Birth:
Address:		
Tel Number(s):		
Email Address:		
Occupation:		
Passport Number:		
Signature:	Date:	



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