**ATHLETIC UNION ENGAGEMENT GRANT FORM**

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| --- | --- | --- |
| **CLUB NAME:**  | **START DATE:** | **FINISH DATE:** |
| **ACTIVITY DETAILS:** (e.g. date, venue, activity – maximum 150 words) |

**BUDGET**

*Please provide a breakdown of the total cost of the event. Any additional costs that appear after your application for funding is received will need to be paid using your own funds. You must be able to provide invoices and/or receipts for payment requests.*

* **EXPENDITURE**

|  |  |
| --- | --- |
| **ITEMS, EQUIPMENT, HIRE, PROMOTIONS, OTHER COSTS** | **AMOUNT (£)** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL AMOUNT** | **£** |

* **INCOME**

|  |  |
| --- | --- |
| **YOUR CONTRIBUTION, GRANTS, TICKET SALES, SPONSORS, OTHER INCOME SOURCES** | **AMOUNT (£)** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL AMOUNT** | **£** |

Will there be any profit? Yes/No

If yes, please explain where this money will go.

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|  |

**FURTHER INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| How many people will benefit directly from this funding? |  | How many people will benefit indirectly from this funding? |  |

If there are any additional costs involved in your proposed activity that you have not applied for in this application, how will you pay for these and what will the amounts be?

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|  |

**ANY ADDITIONAL INFORMATION**

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Please outline the number of **NEW** Club members from the following under-represented student groups that will benefit from your project:

|  |  |
| --- | --- |
| **UNDER-REPRESENTED STUDENT GROUP** | **NUMBER OF NEW STUDENTS** |
| Black and Minority Ethnic |   |
| Disabled |   |
| Distance Learners |   |
| Faith Students |  |
| International |   |
| LGBT+ |   |
| Mature |   |
| Part-time |   |
| Postgraduates |   |
| Partner Colleges |   |
| Women |   |
| **TOTAL** |  |
|  |  |