## Henry Colborn Trust: How to Complete the Online Application Form

The Merchant Taylors' Charity Management ('MTCM') online application form is primarily designed for completion by registered charities. We appreciate that applicants to the Henry Colborn Trust often do not fit this profile. However, the form requires at least one letter or number to be entered in every box, otherwise the application cannot be submitted.

**IF YOU ARE APPLYING ON BEHALF OF A REGISTERED CHARITY**, please complete the form in full. You will not need to obtain a Unique Reference Number from us.

IF YOU ARE APPLYING EITHER ON BEHALF OF A GROUP OR ORGANISATION WHICH IS NOT A REGISTERED CHARITY, OR ON BEHALF OF AN INDIVIDUAL, please take the steps set out below.

**Step 1:** In order to start completing the form, you will first need to obtain a Unique Reference Number (URN) for the individual/group/organisation on whose behalf the application will be lodged. **To obtain a URN, please email a request to charities@merchant-taylors.co.uk. Please ensure your email request complies with the following:** 

- 1. the subject bar should read: Henry Colborn Trust, request for URN
- 2. in the email itself, please state in full the name of the individual or group/organisation on whose behalf the application will be lodged
- 3. if it is a group or organisation, please include a link to the group or organisation's website (if any).

Step 2: Please then complete the online application form, using the guidance in the table set out in the remainder of this guidance document.

Section/box in the online application form	What you should type if applying on behalf of an INDIVIDUAL CHILD RESIDENT IN ASHWELL	What you should type if applying on behalf of a GROUP OR ORGANISATION WHICH IS NOT a registered charity
SECTION: CHARITY DETAILS		
Registered Charity Name	[Name of parent or guardian completing the form] on behalf of [name of child] (eg John Smith on behalf of Sally Smith)	The group or organisation's official name
Registered charity number	The URN assigned by Merchant Taylors' Charity Management	The URN assigned to the group or organisation by Merchant Taylors' Charity Management
Registered Address Line 1 and 2	The address of the parent or guardian completing the form	The address of the group/organisation
All other boxes in the 'Charity Details' section	The parent or guardian should enter their details in all boxes marked with an asterisk (*).	Enter the group/organisation's details in all boxes marked with an asterisk (*).
SECTION: CONTACT DETAILS		
Job Title	Enter an X	Enter the job title or unpaid role title of the person completing the form
All other boxes in the 'Contact Details' section	The parent or guardian should enter their details in all boxes marked with an asterisk (*).	Enter the contact details of the person completing the form

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SECTION: ABOUT THE CHARITY		
Charitable purpose of organisation as worded in your governing document	Enter an X	Sum up the purpose of the group/organisation in a few words
Geographical remit of charity	Select UK Only	Select UK Only
Geographical remit of charity within UK	Select South East	Select South East
Have your charity trustees conducted a skills audit within the last 5 years?	Select no	Select no, unless your organisation has a governing body and that governing body has conducted a skills audit within the last 5 years
SECTION: CHARITY BANK DETAILS		
Complete all of this section	Enter the details of the bank account into which a grant should be paid, if the application is successful	Enter the details of the bank account into which a grant should be paid, if the application is successful
SECTION: PROJECT DETAILS		
Complete all of this section	'The project' is the thing for which the child is seeking a grant.	If you are seeking funds for general running costs, then type 'general running costs' in the box: 'What name have you given the project you are seeking funding for?'

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Drop down menu 'Please select one of the following'	Select 'The charity has not previously run any project similar to this'.	Select the appropriate option.
SECTION: PROJECT BUDGET		
	Complete this section in full in relation to the cost of the thing for which the child is seeking a grant. Enter an X in the box: "How will you ensure this project is cost effective?" If the grant request is about paying for something, please upload a price quotation or similar in the box for uploading a project budget.	Complete this section in full
SECTION: FINANCIAL INFORMATION		
What is the date of your most recent audited or independently examined annual accounts?	Enter 01/01/2018	Enter the date of the document explained in the next row of this table, using format dd/mm/yyyy

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'Please attach your most recent set of audited or independently examined accounts'	Upload any other document relevant to the application (eg, a specialist report on why the money is needed). If there is no such document, upload a blank Word document.	Upload the most recent set of annual accounts for your group or organisation. If your group does not have its own separate accounts, please upload a document which clarifies your group's annual income and expenditure (for example, a income and expenditure for a church youth group is likely to appear as an item somewhere in the accounts of the church itself).
All other boxes in this section	Please enter the number 1	Please enter the number 1
SECTION: OTHER INFORMATION		
The two drop-down menus:	Please select: "My charity does not work with children or vulnerable adults"	Please select the appropriate option
All other boxes in this section	Please complete	Please complete