

Hospice Grant Application Form

MCF can offer a grant towards the operating costs of independent hospices and palliative care services in England and Wales. It is the policy of MCF not to fund building or other start-up costs for a hospice which has not yet opened, or to contribute to hospices which are owned, managed and predominantly funded by the NHS.

Children's hospices providing palliative or respite care will also be considered. Where a service is for children this should be made clear on the form.

A full set of the most recent audited accounts, not more than 18 months old, must be provided with this completed form. Together they must be sent to the MCF office by Friday 17th August 2018.

Please email your completed application form and supporting information to

charityapplications@mcf.org.uk

Charity Grants Department, Masonic Charitable Foundation,
60 Great Queen Street, London, WC2B 5AZ.

Call 0203 146 3337 | Email charityapplications@mcf.org.uk
Visit www.mcf.org.uk

For Freemasons, for families, for everyone



The information requested in this application form is the minimum required for a grant to be considered – all sections must be completed before submission. Applicants may enclose additional information but this should complement and not replace the information provided on this form.

1 Hospice Details

Name of hospice:

Registered charity number:

Year hospice established:

Contact name:

Job title:

Hospice address:

Tel:

Email:

Website:

Social media:

Is the hospice part of a group of hospices or other umbrella organisation? Yes No

If 'yes', please give the group name, the number of hospices and the principle address:

Is the hospice owned, managed by or substantially dependent on the NHS? Yes No

Please state the proportion of revenue funding that comes from NHS sources as a percentage of income:

Please state whether the service is for adults or children: Adults Children

How many beds are available for residential care?

Approximately how many service users have received residential care in the past twelve months?

Does the hospice provide day care services? Yes No

In the past 12 months how many service users received day care services?

Does the hospice provide home care services? Yes No

In the past 12 months how many service users received home care services?

Please provide any other information you think will be relevant to your application:



2 Bank account details for BACS payment of grant

Account name:

Account number:

Sort code:

3 Applicant declaration

I confirm that I am an authorised representative of (charity name)

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To the best of my knowledge the information I have provided on this application form is correct. If the Masonic Charitable Foundation agrees to make a grant the money will be used exclusively for the purposes described in this application form.

Print name (must be Senior Executive):

Position in the hospice charity:

Signed: Date: / /

By submitting this application, you agree that the Masonic Charitable Foundation will hold and process any personal data provided in this grant application in accordance with all current data protection legislation and in line with our Data Protection Policy

We will use this information for the purposes of assessing your application, managing or monitoring any grant awarded, related administration, promotion or research purposes, and for sharing relevant information to other funding organisations to use in their own assessment of applications and managing or monitoring of grants awarded. Data will be retained for a reasonable period, in accordance with our data retention policies, after which time it will be destroyed.

Some or all of the information you provide to us may be shared with a Lodge or Metropolitan, Provincial Grand Lodge or associated Masonic charity in order to promote the grant or if we believe one or more may be able to assist you with funding.

We wish to take good care of personal data, and only process personal data necessary for our purposes. For this reason we strongly advise that you do not provide details of named or identifiable individuals (e.g. their job title, connection to your organisation, physical attributes or other description etc.) either in details of beneficiaries supported, in case studies provided, or in any other information. Should you have particular reasons why such information should be provided to us, please contact us before sending us the information.

The Masonic Charitable Foundation is a Data Controller registered with the Information Commissioner's Office, Registration number ZA161045.

4 Application check-list

- The most recent full audited accounts are enclosed - Please state financial year
- The completed application form
- Proof of bank account details

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