



Northwards Housing

Starter Grant Application Form

Please return this form to your Resident Involvement Officer at Northwards Housing, with a signed Grant Aid Agreement, details of the tenant and resident groups' account and the minutes from your inaugural meeting

Name of your group: _____

Name & address of treasurer

Postcode:
Telephone number:

Name & address of secretary

Postcode:
Telephone number:

Name & address of chairperson

Postcode:
Telephone number:

What date did you hold your inaugural meeting? ___ / ___ / ___

How often do you hold

1. public meetings? _____ 2. committee meetings? _____

Have you met with your Local Services Manager? Yes No

Which is your Local Services Team? _____

PTO

How many committee members does your group have? _____

Have you adopted Northwards Housing's model
Constitution for groups?

Yes No

We declare the above information to be correct at the time of application:

Signature Treasurer _____ Date: ___ / ___ / ___

Signature Chairperson _____ Date: ___ / ___ / ___

To be signed by a Resident Involvement Officer from Northwards
Housing

I can confirm that the group has met the qualification requirements for Starter
Grant funding.

Name of Resident Involvement Officer _____

Signature _____ Date: ___ / ___ / ___

Office Use Only
Starter Grant Application

- | | | |
|---|----------|------------------------------------|
| 1. Form Complete? | YES / NO | 5. If returned, on what date: / / |
| 2. Grant Aid Agreement completed? | YES / NO | 6. Application processed? YES / NO |
| 3. Minutes of inaugural meeting? | YES / NO | 7. Database updated? YES / NO |
| 4. If NO to any, form returned to group? YES / NO | | 8. Actioning officer: |