

**PLEASE ENSURE THAT YOU READ THE CRITERIA FOR APPLICATIONS BEFORE
COMPLETING THIS FORM**

ABOUT YOUR ORGANIZATION

Name of group/ charity/ organization

Your charity number, if applicable

Address
(Incl. Post Code)

.....
.....
.....
.....
.....

Contact Person

Position and Tel

ABOUT YOUR PROJECT

Name of Project

Purpose of Project

Reasons for applying for a grant from the Scottish Veterans Fund

Is there anything else you wish to tell us?

SIGNED: **DATE:**

POSITION:

This form should be returned to:

**Scottish Veterans Fund
The Secretary
Veterans Scotland
New Haig House
Logie Green Road
EDINBURGH
Mid-lothian
EH7 4HR**

Telephone: 0131 557 2782

Please use additional sheets if required.

