



**GRANT FUNDS APPLICATION FORM  
FOR NATIONAL SPORTING ORGANISATIONS AND SPORT SERVING BODIES**

1. Name of Organisation \_\_\_\_\_
2. Address of Organisation \_\_\_\_\_  
\_\_\_\_\_
3. Contact: Name \_\_\_\_\_  
Tel No \_\_\_\_\_  
Fax No \_\_\_\_\_  
Email \_\_\_\_\_  
url \_\_\_\_\_
4. What is the nature of your activity or project? Choose one from the list below and indicate details where necessary.  
☐ Sport development/competition (clinics, training, camps etc.)  
☐ Fundraising Event  
☐ Recognition Event (e.g. awards programme)  
☐ Educational (conference, meeting, expo, workshop, seminar etc.)  
☐ Research  
☐ Other  
\_\_\_\_\_

What is the main objective of the activity or project?

\_\_\_\_\_  
\_\_\_\_\_

5. Where is your activity or project taking place?

\_\_\_\_\_  
\_\_\_\_\_

6. Who is the owner or manager of the facility in which you intend to host or attend the activity or project?  
Tick one and indicate where necessary.

- ☐ Ministry of Sport and Community Development or Affiliate \_\_\_\_\_  
☐ Other Ministry of Government \_\_\_\_\_  
☒ Municipal Corporation \_\_\_\_\_  
☐ Community Council \_\_\_\_\_  
☐ Faith-Based Organisation \_\_\_\_\_  
☐ Non Governmental Organisation \_\_\_\_\_  
☐ Private Company \_\_\_\_\_  
☐ Private Individual \_\_\_\_\_  
☐ Other \_\_\_\_\_

7. How many of the following are expected to participate in the activity or project? Tick all that apply and indicate in numbers.
- |  |       |
|--|-------|
| <input type="checkbox"/> Athletes        | _____ |
| <input type="checkbox"/> Coaches         | _____ |
| <input type="checkbox"/> Match Officials | _____ |
| <input type="checkbox"/> Participants    | _____ |
| <input type="checkbox"/> Spectators      | _____ |
8. How many of the following groups will participate in the activity or project? Tick all that apply and indicate in numbers.
- |   |       |
|---|-------|
| <input type="checkbox"/> Women or girls                                 | _____ |
| <input type="checkbox"/> Persons with disabilities (physical or mental) | _____ |
| <input type="checkbox"/> Young people (12 – 29 years old)               | _____ |
| <input type="checkbox"/> Senior Citizens (Over 60 years old)            | _____ |
9. Which sport/s will be played at the activity or project?
- \_\_\_\_\_
10. Is the governing body (National Sporting Organisation/international governing body) for the sport/s to be played involved in this event or activity?
- ☐ Yes                      ☐ No
11. If yes, how is the body involved?
- \_\_\_\_\_
- \_\_\_\_\_
12. How will you market or publicise the activity to the intended participants? Tick all that apply and specify where applicable.
- |   |       |
|---|-------|
| <input type="checkbox"/> Media Advertising (TV, radio, newspapers, etc.)                                      | _____ |
| <input type="checkbox"/> New Media Advertising (Internet, podcast, email, etc.)                               | _____ |
| <input type="checkbox"/> Printed Material (flyers, posters, brochure) Word of Mouth (gossip, ole talk, phone) | _____ |
| <input type="checkbox"/> Other  | _____ |
13. How will the event or project be documented? Tick all that apply.
- |  |
|--|
| <input type="checkbox"/> Video   |
| <input type="checkbox"/> Photograph <input type="checkbox"/> Activity Report               |
| <input type="checkbox"/> Statistical Recording (scorecards, game sheets, team lists, etc.) |
| <input type="checkbox"/> Other _____   |
14. If your activity will utilise a Facilitator for an educational purpose such as a workshop or seminar, please indicate his/her name(s), contact information and qualifications in the area of instruction. Use separate sheet if necessary.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

15. Have you applied for/or received funding from another Trinidad and Tobago Government agency or non-revenue earning State entity for the activity you are applying for?

(a) No ☐ Yes ☐

(b) Details of organisation:

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(c) Purpose of Funding:

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16. Does your activity or project intend to utilise volunteers (someone who performs a specific function but receives no monetary compensation)?

☐ Yes ☐ No

17. If yes, please indicate in which areas the volunteers will be utilised. Tick all that apply.

- ☐ Match Officiating  
☐ Facilitation/Lecture  
☐ Coaching  
☐ Administration  
☐ Marketing/Publicity  
☐ Event Coordination/Management  
☐ Documenter (photographer, etc.)  
☐ Other

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18. What is the total budget for your activity or project?

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19. Indicate cost breakdown on separate sheet, including the sum requested from the Ministry of Sport and Community Development or its affiliates.

20. If this application is NOT the first time you have received grant funding from the Ministry of Sport and Community Development or its affiliates, please describe the last activity or project for which a grant was disbursed, including date, objectives and the sum granted. Use a separate sheet if necessary.

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21. Describe how your activity will further develop your sport in the upcoming financial year

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## AUTHORISATION

I certify that the information given in this application is true and correct (applicants under the age of 18 must obtain the signature of their parents/guardian). I understand that should this application be successful, some of the information herein may be used for promotional purposes.

Applicant

Signature:		Date:	
Name in Block Letters:			

Parent/Guardian (where applicable)

Signature:		Date:	
Name in Block Letters:			

Completed application may be submitted by:	
Post:	Hand Delivery:
‘Sport Funding’ Ministry of Sport and Community Development  Head Office Nicholas Towers, Independence Square, Port of Spain	‘Sport Funding’ Ministry of Sport and Community Development  Head Office Nicholas Towers, Independence Square, Port of Spain  Caroni District Office Central Regional Indoor Sport Arena, Saith Park, Manic Street, Chaguanas  St. Andrew/St. David District Office Sangre Grande Community Swim Pool, Ojoe Road, Sangre Grande  Nariva/Mayaro District Office Mayaro Sports Facility, Plaisance Road, Mayaro  St. Patrick District Office South Western Regional Indoor Sport Arena, Egypt Village, Point Fortin

## DISCLOSURE NOTICE

The Ministry of Sport and Community Development is collecting information on this form to ascertain whether or not your application meets the Grant/Funding criteria. If you do not provide all the information requested the Ministry may be unable to process your application for funding.

Should this application be successful, some of the information in this application form may be provided to media organisations, youth organisations, Government Ministries, local governing bodies, non-revenue earning State entities and young people for the purpose of promoting and reporting on your activity. Information will be distributed via press releases, promotional material, websites, periodic reporting documents and other departmental publications.

The personal information you provided is able to be accessed and updated, if necessary, by contacting the Physical Education and Sport Division of the Ministry of Sport and Community Development.