



MARLBOROUGH COLLEGE CHARITABLE FOUNDATION

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Marlborough  
New Zealand  
e: info@mccf.org.nz  
w: www.mccf.org.nz

1 Name of person/s presenting this application:

2 Details of the group for which this application is being made:

\_\_\_\_\_

\_\_\_\_\_

3 What purpose is the grant to be used for?

4 What is the total cost of this project?

5 How much are you asking MCCF for?

\$ \_\_\_\_\_

\$ \_\_\_\_\_

6 Cost Breakdown - Where Possible Please attach quotes

7 What is the timing of your project?

8 Approximately how many students will benefit

\_\_\_\_\_

\_\_\_\_\_

9 Have you applied to any other source or organisation for funding for the same purpose (if so please provide further details: Name of funding organisation, date applied, amount requested and outcome)

Yes

No

10 What are the key benefits of this project to students and/or the wider school community

11 Signoff

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**MCCF Use only:**

<b>Application No:</b> <input type="text"/>	<b>Trustees Assigned:</b> <input type="text"/>	<b>Grant No:</b> <input type="text"/>	<b>Grant Area:</b> (Sport, Arts, Academic, Extra Curricular) <input type="text"/>
<b>Date received:</b> <input type="text"/>	<b>Approved / Declined:</b> <input type="text"/>	<b>Date Paid:</b> <input type="text"/>	<b>Decision Date:</b> <input type="text"/>
<b>\$ Paid:</b> <input type="text"/>	<b>Trustee Signature:</b> <input type="text"/>		

**Trustee Notes:**