

4 Total Cost of Project

Cost Item	Amount £
Total (to section 2)	

5 Total Grants / Financial Assistance Obtained

Source of funding:	Amount £
Crowthorne Educational Charity	
Total (to section 2)	

We the undersigned confirm that the information given is correct and that the activity for which the Grant was obtained was completed.

Signature of Applicant Date

Signature of Head of Educational Establishment

Contact Tel No

E-mail address