**Goodliff Awards Application Form**

On completion, the form is to be sent to the Goodliff Award Administrator at goodliff.awards@gmail.com.

**1. Applicant Details:**

|  |  |
| --- | --- |
| **Name and address of applicant or Organisation (if applicable):** | **Name and address for correspondence, if different:** |
| **Name:**  |  | **Name:** |  |
| **Address:** |  | **Address:** |  |
| **Postcode:** |  | **Postcode:** |  |
| **Telephone:** |  | **Telephone:** |  |
| **Email:** |  | **Email:** |  |

**2. General Purpose of the Request:**

Please give a brief description of the purpose of the request. (see Information for Applicants – Goodliff Awards Typical Projects):

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**3. Description of Proposed Research, Project, etc.**

Please give all relevant details available, including proposed timeline of activities, even if only tentative:

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**4. Proposed Timeline of the Project Activities:**

Please provide an outline of the activities for completion of the project:

|  |  |  |
| --- | --- | --- |
| **Date from:** | **Date to:** | **Activity:** |
|  |  |  |
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Anticipated project completion/publication date:

**5. Projected Cost:**

Give details of all projected costs and where relevant, quoted costs of suppliers, who will provide services or items for the project, and enclose any quotations provided:

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**6. Other Sources of Grant Aid Requested and/or Approved:**

Provide details of any other sources from which grant aid is being sought or is promised, including amount(s):

|  |  |  |
| --- | --- | --- |
| **Name of Grant** | **Amount** | **Requested/Approved** |
|  |  |  |
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**7. Institution, Society Details:**

If applicant is an institution, society, etc., provide details, including names of president and chairman. If the society has charitable status, provide registered charity number:

|  |  |
| --- | --- |
| **Name of Institution or Charity:** |  |
| **Address:** |  |
| **Postcode:** |  |
| **Telephone:** |  |
| **President:** |  |
| **Chairman** |  |
| **Charity Registration No:** |  |

**8. Details of Documents, Artefacts or Equipment:**

If the award is for the acquisition of documents, artifacts or equipment by a museum, archive etc., indicate who will be the legal owner and where they will be stored/housed:

|  |  |  |
| --- | --- | --- |
| **Artifact/Equipment:** | **Legal Owner:** | **Housed at:** |
|  |  |  |
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|  |  |  |

**9. Applicant Referees:**

The Society requires all applicants to provide names and address of at least two referees:

|  |  |
| --- | --- |
| **Name and Address of Referee 1:** | **Name and Address of Referee 2:** |
| **Name:** |  | **Name:** |  |
| **Address:** |  | **Address:** |  |
| **Postcode:** |  | **Postcode:** |  |
| **Telephone:** |  | **Telephone:** |  |
| **Email:** |  | **Email:** |  |

**10. Other Relevant Information:**

Provide any other relevant information that will support the request for a Goodliff Award.

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**Declaration**: I apply for a Goodliff Award for the above project/ research. I accept the conditions referred to in *Information for Applicants*.

Signature: …………………………………

|  |  |
| --- | --- |
| Name: |  |
|  Date: |   |

Applications to be sent to:
The Goodliff Award Administrator
email: goodliff.awards@gmail.com