VAT Vectis Archaeological Trust

Grant Application form for Isle of Wight Museums or archaeological Sites.

Name of museum or site	
(BLOCK CAPITALS)	
Address	
Website	
Public opening hours	
Name of applicant and relationship to museum or site	
Address of applicant	
(if different from above)	
Email address	
Telephone number	
Are you connected with an	
officer of VAT or has your site	
or museum received a	
previous VAT grant?	
Title of project	
Brief description of the project	
to which the grant will be	
applied	
(no more than 150 words)	
Please be specific about how a	
VAT grant will enhance the	
presentation, conservation or	
study of your museum or site.	
study of your museum or site.	
Other sources of funding	
applied for in connection with	
this project (Please include	
amounts and date of decision.	
You should inform VAT as soon	
as any awards are made).	
Name the person and his/her	
position in authority that will	
be responsible for accepting	
and spending the grant on	
behalf of the institution.	
benan of the institution.	

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Name the person				
to whom a VAT be made payable				
Give the contact		Name and		
individual, outside of your		Position		
own organisation				
willing to act as a referee for		Postal address		
this grant applic	cation.			
		Email address		
Itemised cost			uotation(s) as you can for the p	roject or £
Itemiseu cost	individu	al purchases.		
			Total grant appli	ed for:
1				
I agree to abide by	the terms and co	onditions set out in	the accompanying guidelines.	
Signed: Date:				
signeu			Date.	•••••
For VAT use:				
	Decision or Defer	ral of the Trustees.		Reply to Applicant
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