

# Support to Community Facilities (Sports) Grant Evaluation



Group Name	<input type="text"/>		
Main contact	<input type="text"/>	Grant Amount	<input type="text"/>
Address	<input type="text"/>	Date of Offer	<input type="text"/>
	<input type="text"/>	Grant Application No.	<input type="text"/>
Postcode	<input type="text"/>	Tel. No.	<input type="text"/>

**1 Please provide the following information for the period covered by your last Support to Community Facilities grant:**

Number of:

Adult matches (with changing rooms)	<input type="text"/>	Junior matches (with changing rooms)	<input type="text"/>
Adult matches (without changing rooms)	<input type="text"/>	Junior matches (without changing rooms)	<input type="text"/>
Adult training sessions	<input type="text"/>	Junior training sessions	<input type="text"/>
Community bookings (give details below)	<input type="text"/>	School bookings	<input type="text"/>

**2 Please give examples of any achievements, highlights or targets met over the last year:**

**3 Please let us know about your organisation's aims and targets for the forthcoming year:**

Name	<input type="text"/>	Position	<input type="text"/>	Date	<input type="text"/>
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On completion of your project, please complete this form in full and return it to the Grants Unit at the following address:

**Grants Unit**, Solarhus, 3 North Ness Business Park, Lerwick, Shetland, ZE1 0LZ

Email [grants.unit@shetland.gov.uk](mailto:grants.unit@shetland.gov.uk) Tel: 01595 743827/743828

**PLEASE NOTE THIS INFORMATION *MUST* BE SUBMITTED BEFORE ANY FURTHER APPLICATIONS FOR GRANT ASSISTANCE CAN BE CONSIDERED**