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| Safe Spaces Small Grants Programme Reference Form for Applicant GroupsPlease ask your referees complete the below form and return it to you so you can attach this to your application |
| **Name:** |  |
| **Job Title:** |  |
| **Telephone and Email:** |  |
| **How is this group known to you:** |  |
| **Why do you want to support this proposed activity or group?** |  |
| Declaration |
| I declare that to the best of my knowledge, the information provided in this application is truthful and correct. |
| **Signature:** |  |
| **Name:** |  |
| **Job Title/relationship to Applicant group:** |  |
| **Date:** |  |
| **Telephone number:** |  |