



**Safe Spaces Small Grants Programme Reference Form for Applicant Groups**

Please ask your referees complete the below form and return it to you so you can attach this to your application

<b>Name:</b>	
<b>Job Title:</b>	
<b>Telephone and Email:</b>	
<b>How is this group known to you:</b>	
<b>Why do you want to support this proposed activity or group?</b>	
<b>Declaration</b>	
I declare that to the best of my knowledge, the information provided in this application is truthful and correct.	
<b>Signature:</b>	
<b>Name:</b>	
<b>Job Title/relationship to Applicant group:</b>	
<b>Date:</b>	
<b>Telephone number:</b>	