

Name



North Norfolk Armed Forces Community Fund Independent Referee Form

Please give this document to your independent referee to complete and return to you for submission with the grant application

Independent Referee Contact Details
Name
Address
Phone
Email
The Organisation
Name of Organisation (for which you are Providing a reference)
The aim of the Project
What is your association with the organisation?
Please explain your reasons supporting this application e.g. how the proposed project will benefit its target community?
I support the application for this project

Date

Signature