



# GRANT APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

*Please complete all parts of the form giving as much detail as possible or indicate with a ✓ in the appropriate box.*

## 1. STATUS *Please tick all that apply*

I am a: Member of Raptor Rescue , Raptor Rescue Accredited Rehabilitator , Other  *Please specify:-*

## 2. Existing Facilities

### Intensive Care Unit (Hospital Cage)

Do you have an Intensive Care Unit (Hospital Cage)? Yes  No

Is it constructed from easily cleaned materials? Yes  No

Does it have any type of controlled heating? Yes  No

### Aviary(s)

How many rehabilitation aviaries do you have?

How many of them are 'seclusion' aviaries?

How many of them are 'hacking' aviaries?

What size are your aviaries? *attach separate page if required*

What are they constructed of?

What type of frontage do they have? Chicken wire  Weld mesh  Other  *please specify:*

Please state the size and gauge of the wire used?

Do they have a double door entrance system? Yes  No

### 3. General Equipment

Do you have a catch net? Yes  No

Do you have transportation boxes? No  Yes

Are they constructed of easily cleaned materials? Yes  No  - or are they a disposable type? Yes  No

### 4. First Aid Equipment

Do you have a drugs/medicine cupboard/cabinet? Yes  No

Is it out of the reach of children? Yes  No

Is it secure? Yes  No

Do you have fluid replacement equipment? Yes  No

Do you have various size syringes? Yes  No

Do you have various size crop tubing? Yes  No

Do you have a supply of glucose lectade or similar? Yes  No

Do you have a supply of disposable gloves? Yes  No

Do you have suitable disinfectants? Yes  No

### 5. Records

Do you keep accurate records of all casualties? No  Yes

*Please remember you will be asked to complete an annual survey form which should include the following:*

- *Date you received the bird.*
- *Any identification, ring numbers*
- *Who passed the bird on to you i.e. Vet, Police, Member of Public, RSPB, RSPCA etc.*
- *Species, male or female, adult or immature.*
- *Injuries.*
- *Does it require stabilization, minor or major treatment etc.*
- *Any Final outcome, i.e. released, died, euthanised, retained, passed to other rehabber.*

**Any other information or comments you feel may be relevant to your application:**

I wish to apply for a grant of £..... towards the purchase of:

.....

This application will be considered by the Trustees of Raptor Rescue at their earliest convenience and you will be notified of the outcome.

Each application should be submitted along with the following documentation:

- This completed application
- Details of the item being purchased (including details of materials and design if for aviary)
- Copy of the estimate for the total cost involved
- Photographs of the proposed site if for aviary
- Letter of authorization from land owner where aviary is to be erected

On completion of work or item has been received:

- Please submit receipt for all work carried out
- Photographs of the completed aviary
- Signed 'Terms of agreement' (This will be sent to you by the Secretary)

**No grant will be paid until the order has been completed and all the relevant paperwork received by Raptor Rescue**

**Applicant declaration:** I (print name) \_\_\_\_\_ declare that the above application is a true representation of my facilities at the said address and I would like to apply for a **Grant from Raptor Rescue**. I agree to be visited by a trustee of the charity at any reasonable time in order to inspect my facilities.

I also agree to maintain my membership to Raptor Rescue and to participate in the annual survey when requested and I understand that to continue as an **Accredited Rehabilitator** I need to return the survey form(s) each year along with an **Annual Accredited Declaration Form**.

I agree to disclose to the trustees of the charity details of any convictions or investigations related to animals and/or wildlife that may have been carried out by the police or an animal welfare organisation. I also give my permission for the police to pass any relevant information to the charity's trustees, including information of previous convictions or investigations they have carried out in relation to me and for them to disclose current or future enquiries, which may have a bearing on my continued suitability in Raptor Rescue.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Please send completed Application with supporting photographs and documents to the Secretary (see web site for name & address)**

**Raptor Rescue Board of Trustees:**

This application has been accepted at a meeting of the Board of Trustees on: \_\_\_\_\_

Signed: \_\_\_\_\_ Chairman

Signed: \_\_\_\_\_ Secretary