

Working Party request for financial support **year**

Deadline for receipt January xx, year



Name of Working Party	
The project/s or activity requiring support Please read the guidance in Appendix 5 before applying and give as much detail as possible	
The amount of financial support required with cost breakdown Please ensure to give a full and detailed breakdown of costs/budget	
The actions required to support the project or activity e.g. meetings, design, printing etc.	
Reasons why ISBT should support the project or activity	

Name: _____

Date _____

