



### DONATION REQUEST APPLICATION

Date:		
Name of Organisation: Address:		
Primary Contact Name: Title: Phone Number(s):		
Branch/Dept. received by:  Name of Employee received by:		Amount Requested:

1. Please choose one:  One-time request  Annual request
2. Is the organisation registered?  Yes  No
3. Briefly describe the project/event including date: \_\_\_\_\_  
\_\_\_\_\_
4. Who will benefit from this request and how will the funds be used? \_\_\_\_\_  
\_\_\_\_\_
5. Does the organisation have an account or dealings with Republic Bank (Guyana) Limited?  
 Yes  No  
If "Yes", please indicate your account(s) number(s) or details of other \_\_\_\_\_
6. State briefly area(s) of support needed: \_\_\_\_\_  
\_\_\_\_\_
7. State date by which donation is required: \_\_\_\_\_
8. Has the organisation requested funds from any other source for this same purpose?  
 Yes  No  
If "Yes", please list these and amounts committed: \_\_\_\_\_  
\_\_\_\_\_
9. Indicate copies of documents attached:  Charities Registration  Event budget  
 List of Officers of the organisation  Government Ministry Registration  
Other: \_\_\_\_\_

**For Official Use:**

Organisation's donation history with Republic Bank (if any):

\_\_\_\_\_  
\_\_\_\_\_

Recommendation: \_\_\_\_\_  
\_\_\_\_\_

Branch Location/Department \_\_\_\_\_ Manager's /OIC's Approval \_\_\_\_\_

Date of Approval \_\_\_\_\_ Amount Approved \_\_\_\_\_ Declined \_\_\_\_\_