

Our Mission

Antonio established The Foundation before he died in November 2017. Amongst his core objectives was the idea to support hospitality related training and development, to promote a better understanding of food origins and nutrition and to make direct support available for organisations working to feed those in need.

Antonio's vision was to support smaller organisations in both The UK and his home country of Italy which, at the heart of their activities, focus on his core objectives.

Applications for up to £10,000 will be considered but typical grants range between £3000 and £5,000

Where and how to send

Apply using the grant application form below. The application should be sent, via email, to trustees@theantoniocarlucciofoundation.org.

The Antonio Carluccio Foundation Grant Application Form

Date of application:	
Organisation name:	
Address:	
Key contact details:	
Organisation website & social media links:	
Are you a registered charity? If so, please provide your registered charity number:	
Are you a non-profit organisation, as defined by Companies House? If so, please payour company registration number:	rovide
Location:	
Trustees and their background in no more than 3 lines each:	
Number of beneficiaries:	
Grant amount requested:	
Please answer all the questions below, ensuring you application does nexceed 1 side of A4.	ot
1. What are you trying to do: Describe what your organisation is, and its a objectives. Who are your beneficiaries? What are the needs that your organ will meet and have are you best placed to meet them? Describe your track redelivering successful projects/initiatives.	isation
2. Why are you applying for a grant: Describe how your organisation plathe grant and how this will affect your beneficiaries. Provide a breakdown obudget for your grant.	
Your organisation	
 What is your projected income for the current financial year and your main income? Please attached a copy of your most recent audited accounts Please confirm that your organisation has up to date policies covering the formula in Equal Opportunities / Diversity Whistle-blowing Staff Complain / Grievance Process Bullying and Harassment in the Workplace Please confirm that your organization records any instances of sexual misconic places in the professional places. 	ollowing: onduct
involving beneficiaries. Please disclose below how many allegations of sexu misconduct your organization has received in the past 5 years and how they dealt with. Please attach more information on an additional sheet if necessary. Signed: Date:	y were
-	

Job Title