

# COMMUNITY GRANTSAPPLICATION FORM 2023-2024

## Basic Details

| **Name of organisation:** |  |
| --- | --- |
| **Address of organisation:**  |  |
| **Organisation type:** Charity/Community Interest Company/Social Enterprise Company/ Voluntary / Community OrganisationOther (please specify): |  |
| **Registered charity number (if applicable)** |  |
| **Project name:** |  |
| **Date of application:** |  |
| **Amount requested (£):** |  |

## Applicant details

| **Name:** |  |
| --- | --- |
| **Position in organisation:** |   |
| **Telephone number:** |  |
| **Email:** |  |
| **Address:** |  |

## Additional Documentation

All applicants need to provide additional information and some of this must be included with your application (see below). Please mark the relevant boxes to show whether you are supplying the information with your application, or if you can supply if requested by the Council. **If you do not submit all the essential information required by the application deadline, we may not be able to consider your project for funding.**

| **Document** | **Provided** |
| --- | --- |
| Two most recent bank statements for ALL your organisation’s bank accounts **(these must be submitted with your application)** | Yes / No |
| Working with children / adults at risk safeguarding policy or policies **(this information must be submitted with your application if your project involves working with children and / or adults at risk)** | Yes / No |
| If your project does involve working with children or adults at risk, are the appropriate individuals cleared by the Disclosure and Barring Service (DBS), and is the appropriate vetting and barring in place? | Yes / No  |

| **✓** | **Please indicate which of the following documents your organisation has. At least one of these documents must be attached to your application unless you have previously provided a copy within the last twelve months with a previous application – please state if this is the case.** |
| --- | --- |
|  | Constitution  |
|  | Set of Rules |
|  | Terms of Reference |
|  | Articles of Association |
|  | Other (Please State):  |

|  |
| --- |
| **If you are not able to provide one or more of the documents listed above, please explain why:** |
|  |

## Your Organisation

|  |
| --- |
| **Your organisation:** |
| **Please provide a summary of the services normally delivered by your organisation and what are your main objectives, including:*** **The types and number of service users you support**
* **If your project supports people from a specific ward / area in Melton**
* **What specific issues you aim to address through your services**
* **Volunteers and / or staff needed to deliver services**
 |
|  |

## Your Project

| **Your Project:** |
| --- |
| 1. **Describe the project you would like us to fund, including:**
* **Type of service provided (for example, training, sessional work, event)**
* **Who will deliver the project (for example, staff, volunteers, facilitator, and their qualifications, if applicable)**
* **Number of people and brief description of your targeted audience/profile who will benefit (for example, age group, personal needs, locality)**
* **Length of time you will work with your beneficiaries / number of sessions / time frame**
* **Where the project will take place**
* **What measures will be in place to sustain the project after the funding**
* **Any organisations you are working with in partnership on this project**
 |
|  |
| 1. **Please explain how you have identified the need(s) for your project, including:**
* **Consultation with beneficiaries / stakeholders**
* **How you have identified demand**
* **How your project is different from other similar provision**
 |
|  |
| 1. **Which of the following Melton Borough Council corporate priorities does your project meet and explain why?**
* **Promote excellent service which will positively impact our communities**
* **Promote improvement of physical health in our communities**
* **Promote improvement of Mental Wellbeing in our communities**
* **Enable children, young people, and older people to make a positive contribution to their communities**
* **Promote access of local people to green spaces**
* **Promote local businesses to prosper**
* **Supports with emerging local Social issues**
 |
|  |

## Financial information

**Section A: Project Costs**

Please list the costs of the whole project (please add extra rows if you need to)

| **Description** | **Amount (£)** |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Project Costs:** |  |

**Section B: Project Income**

Please demonstrate how the project costs will be funded by providing a list of the anticipated income for the whole project, including the total amount you are requesting through the Community Grants budget, contributions from reserves, fundraising, donations and potential / confirmed grant funding from other sources and any subs/membership fees (please add extra rows if you need to).

| **Description** | **Amount (£)** |
| --- | --- |
| Melton Community Grant (amount you are applying for):  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Project Costs:** |  |

| **Additional financial information** |
| --- |
| **b) How will you cover the shortfall if you are not awarded the full amount being requested through the Community Grants Budget?** |
|  |
| **c) Please provide a breakdown of ALL your current bank balances, to include:*** **Current level of reserves**
* **Restricted funds**
* **Ring-fenced expenditure**
* **Surplus funds**
 |
|  |

## Project time scale

Please provide an outline timetable for your project (including start and finish dates)

| **Date**  | **Description of milestone** |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |

## Declaration

I confirm that I am authorised to make this application on behalf of the organisation and that, as far as I am aware, the information submitted is true and complete. Should we be awarded a grant we will make Melton Borough Council aware of any potential changes to the project as soon as we become aware of them. The application is made on the understanding that, should our application be successful, the grant will only be used for the purpose(s) specified in the grant offer letter.

| **Signature:** |  |
| --- | --- |
| **Name:** |  |
| **Position in organisation:** |  |
| **Date:** |  |

## Data Protection

For information about how and why we may process your personal data, your data protection rights or how to contact our data protection officer - <https://www.melton.gov.uk/your-council/data-security-and-access/privacy-notices/>