Appendix 1

Voluntary Grants Application Form

Please ensure that all relevant sections of this application form are completed. If you are applying for more than £2,000 you need to complete the whole form, however if you are applying for less only complete the section indicated in this form.

1. Organisation Contact Details

Name of				
organisation				
Organisation				
address				
	Post code:			
Address for				
Correspondence (if				
different to above)				
	Post code:	Г		
Contact Person(s)		Position		
		organisa	ation	
Telephone		l		
number(s)				
Fax number			•	
Email address(es)				



2. About your organisation

All applicants to complete this session

a.	What is the legal status of your organisation? Please tick which ones of the following applies to your organisation. You may need to tick more than one.
	Company limited by guarantee Friendly society Registered charity Housing Association Partnership (please describe) Part of a regional or national organisation Other (please describe) Please see guidance notes on page
b.	When was organisation set up?
	Briefly describe the aims and objectives of your organisation.



3. Policies and Procedures

All applicants to complete this section

Please note that you are not required to submit supporting documents at this stage. Successful applicants will be required to submit the following information once a grant has been agreed at the Cabinet meeting in March.

The Grant will be withdrawn if the supporting documents are not submitted by the agreed deadline. See covering letter for details.

Please see guidance notes on page.....

Please confirm that you have all of the following policies/statements and procedures in place?

Required policies/statements and procedures for grants awards under £2,000

A constitution/memorandum and article of association/trustees/deeds of trust

A bank account in the organisation's name

Policies for the protection of children and vulnerable adults (if relevant)

Health and safety

Appropriate insurances and indemnities (if relevant) procedures (if relevant)

Written statement of commitment to equal opportunities

Additional requirements for grants awards between £2,001 and £10,000

All of the above including:

Certified or audited accounts from the previous year (by an independent person). If your organisation has been running for less than 15 months, you may not be able to give us this so in these cases we will accept a 12-month financial projection for the year when you will spend the grant



Additional requirements for grants awards over £10,001

All of the above including:

Employment and staffing policies and procedures, which address the recruitment and selection, and training of staff and volunteers Systems to monitor the quality of services delivered



4. About the Proposed Project/Service

All applicants to complete this section

Please see guidance notes on page For details.

a.	Name of proposed project/service		
b.	Is this a new project/service? YES	NO	
C.	How do you know that there is a need for	or this project/service?	



d.	What are the main aims and objective of the project/service?
e.	Which one of the funding priorities will your project/service address?
f.	Please explain how you project/service meets this priority?



5. Project Delivery

All applicants to complete (a) and (b) in this section

a. How will your project/s	ervice be delivered?	
b. Where will it be deliver	red?	
	ollowing questions in this sectoplying for more than £2,000	tion if you are
c. Who will it be delivered	d by:	
Volunteers	Paid staff	Both
d. If the service is to be d	lelivered by a paid member	of staff, are they
New	Exisitng	



commur	rity?	cuservice a	address the	needs of H	allow's dive	erse

				rom the			
	All appli	cants to d	complete t	this questi	ion		
a. How many	people wi	ill benefit	from this	project?			
Only a	answer the			ns in this s han £2,000		ou are	
b. How will the	ey benefit	from the	project?				
c. Which one	of the follo	owing ar	oune will	henefit fr	om vour	nroject?	
		owing gro	oups will			project?	
c. Which one Gender:	of the folk	owing gro	oups will	benefit fr Fema		project?	

No



Yes

Disabled:

d. Please indicate which of the following groups will benefit from your acitivities:

	Astrono Astro Bitti	D	B. 1 B 1
	Asian or Asian British	Black	or Black British
	Afghani		Caribbean
	Bangladeshi		Ghanaian
	Indian		Nigerian
	Pakistani		Somali
	Sinhalese		Any other Black background – please specify
	Sri Lankan Tamil		
	Any other Asian background – please specify		
Mixed		White	
	White and African		Albanian
	White and Asian		British
	White and Caribbean		Gypsy/Roma Traveller
	Any other Mixed background – please specify		Irish
			Irish Traveller
			Polish
			Romanian
			Serbian
			Any other White background – please specify
Other	Ethnic Groups		
	Arab		
	Chinese		
	Iranian		
	Iraqi		
	Kurdish		
	Lebanese		
	Any other ethnic group – please specify		
		<u>I</u>	



e. How will you know that the project has made a difference to their lives?



7. Project Cost	
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All applicants to complete this section

What is the total cost of the proposed project?	
How much funding are you requesting?	

Please complete the proposed project breakdown below.

	Proposed Project Breakdown		
Expenditure Categories	Item Description	Qty	Costings (£)
Staffing Cost			
	Sub Total		
Volunteers expenses			
	Sub Total		
Overheads (e.g. utility			
bills/ maintenances/ repairs)			
	Sub Total	ı	
Legal and professional			
fees insurance			
	Sub Total	ľ	
Venue			
	Sub Total		
Project Costs (e.g.			
Materials/ stationery/ printing/ refreshment)			
,			
	Sub Total		
Other E			
Other Expenses			
	Sub Total		

Total Project Cost	
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Only answer the following questions in this section if you are applying for more than £2,000

Does your organisation have plans to raise funds from other sources for this or similar
projects for the benefit of Harrow residents?

Yes No

If yes please complete the table below:

Fundraising category	Purpose	Projected annual income	Funding Confirmed Y/N
Fees and			
charges			
Donations			
Sponsorships			
Funding Body (please list names below)			



8. Professional References

Please provide the contact details of two organisations that you currently provide services to, work with or receive funding from.

Please note that this should not be from the following:

- A personal reference from a friend or relative
- A political reference from a councillor or a member of parliament
- A member of the Grant Advisory Panel

Reference 1			
Name of contact			
Organisation			
Address			
Telephone number			
Email address			
Connection with the organisation			

Reference 2		
Name of contact		
Organisation		
Address		
Telephone number		
Email address		
Connection with the organisation		



9. Future of the Project

All applicants to complete this section

Please explain how you plan to continue with this project when this funding has ceased.





10. Declaration

We declare that all the information provided in this application form on behalf of the organisation is correct and complete to the best of our knowledge and acknowledge that if a grant is awarded to you organisation, it will be used exclusively for the purposes described.

Please ensure that two members of your trustee/management committee sign this below:

Print Name:	Signed:
Position in Organisation:	Date:
Print Name:	Signed:
Position in Organisation:	Date:

Please return the completed form to:

Grants Team, Harrow Council Room 227, Civic Centre Station Road, Harrow, HA1 2XF

Email: ???????

Closing date:

LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

