

The Foreshore Trust
SMALL GRANTS FUND
2011 - 12

*Administered on behalf of The Foreshore Trust (Charity No. 1105649)
 by Hastings Borough Council*

V1	APPLICATION FORM
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Name of Applicant Organisation	
Name of project	
Is this a new project?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Total Funding requested	

SECTION 1 - ABOUT YOU AND YOUR ORGANISATION

1. Contact Name	
2. Position in organisation	
3. Address	
4. Post code	
Phone number	Email address
5. In which year did your organisation start?	

6. How would you define your organisation?	
<i>Please tick which ones of the following applies to your organisation. You may need to tick more than one. Please remember to include a copy of your constitution or other governing document with your application.</i>	
<input type="checkbox"/>	Company limited by guarantee
	Registration No.:
<input type="checkbox"/>	Community Interest Company
<input type="checkbox"/>	Other form of Social Enterprise (<i>Please state which</i>)
<input type="checkbox"/>	Friendly Society
<input type="checkbox"/>	Mutual Society
<input type="checkbox"/>	Part of a regional or national organisation
<input type="checkbox"/>	Registered Charity
	Registration No.:
<input type="checkbox"/>	Residents Association
<input type="checkbox"/>	Partnership (<i>Please describe</i>)
<input type="checkbox"/>	Other (<i>Please describe</i>)

7. Eligibility Checklist	
<i>Please tick the checklist below to verify that your group is eligible to apply for funding and ensure that you can provide supporting information as requested</i>	
Yes	no
a. <input type="checkbox"/>	<input type="checkbox"/> We have a written set of rules, constitution, or other governing document, and confirm that the copy provided with this application is current and properly authorized
b. <input type="checkbox"/>	<input type="checkbox"/> A bank account is held in the name of the group requiring at least two signatures for cheque transactions or cash withdrawals OR we have an agreement with another organisation which will support us and receive money on our behalf.
c. <input type="checkbox"/>	<input type="checkbox"/> A copy of our latest annual accounts is enclosed OR (for new groups) we enclose income and expenditure plans
d. <input type="checkbox"/>	<input type="checkbox"/> We have an Equality and/or Equal Opportunities policy (this policy may be contained within your constitution or other governing document)
e. <input type="checkbox"/>	<input type="checkbox"/> We have public liability insurance to the value of at least £1 million (If you do not, please explain why)

f. We have a policy to ensure the safeguarding of children or vulnerable adults (where appropriate).

8. What are the aims of the group and what does it do? (Not scored)

9. How many people are involved in running your group? (Please put numbers in the boxes.)

Committee Members		Paid staff: Full time		Paid staff: Part time		Volunteers		Members	
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SECTION 2 - ABOUT THE ACTIVITY/PROJECT FOR WHICH FUNDING IS SOUGHT

(Note - Questions in this section will be scored for assessment purposes - please consult the guidance notes before you complete this application form to ensure that you answer as fully as possible)

10. Please tell us about the project/activity for which funding is sought. (max 150 words - scored)

10a. When will your project start?

10b. If you are successful in your application, could you spend and account for the full grant allocation by 30 June 2012?

Yes No

11. What evidence do you have that this project meets the needs of your organisation or beneficiaries? (max 150 words - scored)

12. Which of the following funding priorities and outcomes will your project contribute to? (Not scored)

<input type="checkbox"/>	The prevention or relief of poverty
<input type="checkbox"/>	The advancement of education
<input type="checkbox"/>	The advancement of health or the saving of lives
<input type="checkbox"/>	The advancement of citizenship or community development

<input type="checkbox"/>	The advancement of the arts, cultures, heritage or science
<input type="checkbox"/>	The advancement of amateur sport
<input type="checkbox"/>	The advancement of human rights, conflict resolution or reconciliation or the promotion of religious or racial harmony or equality and diversity
<input type="checkbox"/>	The advancement of environmental protection or improvement
<input type="checkbox"/>	Any other purposes currently recognised as charitable and any new charitable purposes which are similar to other charitable purposes

13. Please tell us how the project meets the aims of the scheme as described in the guidance notes. (max 150 words - scored)

14. Please tell us about the people who will benefit from this project/activity and how they will benefit. (max 150 words - scored)

14a. How many people will directly benefit from this project? (Not scored)

15. How will you know whether the project/activity achieves these benefits? (max 150 words - scored)

16. How will you ensure that the project is known and accessible to all the people who might benefit? (max 150 words - scored)

17. Where will your project be delivered? (Please list all venues) (Not scored)

a.	
b.	
c.	
d.	

e.	
f.	

18. Will your project be delivered by: (Not scored)		
<input type="checkbox"/> Volunteers	<input type="checkbox"/> Paid staff	<input type="checkbox"/> Both

19. If the project is to be delivered by paid members of staff, are they: (Not scored)	
<input type="checkbox"/> New?	<input type="checkbox"/> Existing?

20. How much will the project cost? Please give breakdown of main items.	
Item	Cost
	£
	£
	£
	£
	£
	£
	£
Total Cost of Project	£
If you are making a contribution from other funds please indicate here (Please indicate whether any funding is agreed, conditional etc. in the space below)	£
Amount of Grant Requested (Maximum £5,000)	£

SECTION 3 – BANK DETAILS & DECLARATION

Bank Details		
Name of Bank	Address of Bank	
Account in name of	Sort Code	Account Number

DECLARATION

The declaration must be signed by two people authorised to sign on your group's behalf

We confirm that we are authorised to sign this declaration on behalf of our group and that to the best of our knowledge all answers to the questions on this form are accurate. We understand that if our application is successful we will only use the grant for the charitable purpose specified.

Signature:	Print name:	Position in organisation:
Signature:	Print name:	Position in organisation:
Date:		

Checklist for enclosures

Please ensure that all required supporting information is enclosed along with your application

- § This application form, signed by two authorised persons
- § A current copy of your constitution, or other governing document
- § A copy of your latest annual accounts (or income/expenditure plans for brand new groups)
- § Any other supporting documents providing evidence of your ability to manage this project

Applicants are encouraged to submit applications well ahead of the deadline where possible, to allow the administrator sufficient time to prepare all cases thoroughly. Where technical deficiencies are identified at an early enough stage, feedback will be given to enable groups to address shortfalls and resubmit (where appropriate) ahead of the deadline.