



Reference no

Agenda  
Item No.12a

Log no

For office use

## Community Area Grant Application Form 2010/2011

Please ensure that you have read all the Funding Criteria and Additional Guidance Notes before completing this form PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED

**We strongly advise that you contact your Community Area Manager before completing your application.**

### 1 - Your organisation or group

Name of organisation	Broughton Gifford Friendship Club		
Contact name			
Contact address			
Contact number		e-mail	
Organisation type	Not for profit organisation <input type="checkbox"/> Parish/town council <input type="checkbox"/> Other, please specify 60+ Friendship Club		

### 2 - Your project

In which community area does your project take place? (Please give name – see section 3 of the grants pack)	Village of Broughton Gifford
Does your town/parish council know about your project?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What is your project?  Important: This section is limited to 300 characters only (inclusive of spaces).	To take members on an outing to: By community transport to Bishops Lydiard to travel on Steam Train to Minehead and return
Where will your project take place?	from Broughton Gifford to Minehead return
When will your project take place?	early July 2011
How many people will benefit from your project?	approx 30
How does your project demonstrate a direct link to the community plan for your area?  Please provide a reference/page no.	reducing disadvantage and inequalities, and addressing the challenge of hidden deprivation in rural areas

**What is the link between your project and other local priorities?** e.g. Priorities set by your area board and parish plans.  
as above

**How did you discover there was a need for your project and how will your project benefit your local community?**  
**Important: Please do not type in paragraphs – This section is limited to 1200 characters only (inclusive of spaces)**  
Many of our members are widows/ers and our monthly meetings are the only opportunity to socialise. Lonliness and isolation have been highlighted in many pieces of research in rural communities. Some members are living on very low incomes and not necessarily supported by local public services

**Any other information about your project.**

### 3 - Management

**How many people are involved in the management of your group/organisation?**

**Of these, how many are:**

<b>Over 50 years</b>	<b>Male</b>	<input type="text" value="1"/>	<b>Female</b>	<input type="text" value="3"/>
<b>25 – 50 years</b>	<b>Male</b>	<input type="text"/>	<b>Female</b>	<input type="text"/>
<b>Under 25 years</b>	<b>Male</b>	<input type="text"/>	<b>Female</b>	<input type="text"/>
<b>Disabled People</b>	<b>Male</b>	<input type="text"/>	<b>Female</b>	<input type="text"/>
<b>Black and Minority Ethnic people</b>	<b>Male</b>	<input type="text"/>	<b>Female</b>	<input type="text"/>

**If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it?**

**If you were not awarded the full amount requested, what would be the impact on your project?**

The older people we are trying to support will be excluded from the outing

**How will you know whether your project has made a difference in the community?**

Softer outcome of more community cohesion

**Have you contacted Charities Information Bureau for help with your application/ to seek funding?**

Yes

No

**To who have you applied for funding for this project (other than Wiltshire Council)?**

n/a

**Have you been successful?**

Yes

No

**Have you or do you intend to apply for a grant from another area board within this financial year?**

Yes

No

**If yes, please state which ones.**

**Are you in receipt or anticipating other funding from Wiltshire Council for this project?**

Yes

No

#### **4 - Information relating to your last annual accounts (if applicable)**

**Year ending:**

**Month:** April

**Year:** 2010

**A - Total income:**

£1346.35

**B - Minus total expenditure:**

£433.32

**Surplus/deficit for year: (A minus B)**

£913.03

**Free reserves held:**

£913.03

## 5 - Financial information

Project Costs A Please provide a <u>full</u> breakdown e.g. equipment, installation etc.		Project Income B Please list all sources of funding for this project, as provisional (P) or confirmed (C)	
	£		P/C
Bishops Lydiard return	£	Own fundraising/reserves	£
150 miles return 1.50 per mile	£225		£
Hire of driver 11hrs at £6.60	£73	Parish/town council	£
Lunch 28 x £7.90	£221		£
Fare - £12.80 x 28	£358	Trusts/foundations	£
	£		£
	£	In kind	£
	£		£
	£	Other	£
	£		£
	£		£
	£		£
	£		£
<b>Total Project Expenditure</b>	<b>£877</b>	<b>Total Project Income</b>	<b>£</b>

<b>Total project income B</b>	£0
<b>Total project expenditure A</b>	£877
<b>Project shortfall A – B</b>	£877
<b>Award sought from Wiltshire Council Area Board</b>	£877
<b>Bank Details</b>	
<b>Please give the name of the organisations' bank account e.g. Barclays</b>	
<b>Please give the title name of the organisations' bank account e.g. current</b>	

## 6 – Supporting information – Please enclose the following documentation

### Enclosed (please tick)

- Written quotes including the one you are going to use
- Latest inspected/audited accounts or annual report
- Income and expenditure budget for current financial year
- Project budget (if applicable)
- Terms of reference/constitution/group rules
- Evidence of ownership/lease of buildings and/or land

**For new groups, only the group's terms of reference and a projected income and expenditure budget covering a period of 12 months is required.**

**7 - Equalities and Inclusion – Wiltshire Council is committed to ensuring that its work through the Area Boards benefits all sections of our community and promotes equality and inclusion. To assist us in assessing how your application aims to meet our commitment to equality and inclusion, please provide a brief answer to the following:**

a) **How does your project work to either (a) promote equality and access to services/facilities, and/or (b) reduce disadvantage?**

using community transport we can facilitate two of our members who have mobility issues

b) **How does your project work to promote inclusion, participation and good community relations?**

some of our members volunteer for reading at school and pre-school and our group involves our village school on occasions working towards community cohesion

c) **Is your project targeted at a specific group? If yes, please tick any of the following which apply**

- Under 25's     Over 50's
- Mostly or all men/boys                       Mostly or all women/girls
- Specific minority ethnic groups (please state which groups)
- Specific faith groups (please state which groups)
- People/families on low income
- Other disadvantaged groups (please state which groups)

**8 - Declaration (on behalf of organisation or group) – I confirm that...**

- I have read the funding criteria
- The information on this form is correct, that any award received will be spent on the activities specified, that I will complete a monitoring form (if requested) following completion of the project.
- If an award is received, I will complete and return an evaluation sheet.
- That any other form of licence or approval for this project has been received prior to submission of this application.
- That the necessary policies and procedures will be in place prior to the commencement of the project outlined in this application.     Child Protection     Public Liability Insurance
- Equal opportunities     Access audit     Environmental impact
- Planning permission applied for (date)                      or granted (date)
- That acknowledgement will be given of Wiltshire Council support in any publicity, printed or website material.
- I give permission for press and media coverage by Wiltshire Council in relation to this project.

Name:

Date: 14/01/2011

Position in organisation:

**Please return your completed application to the appropriate Area Board Locality Team**