



Reference no

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	Trowbridge Neighbourhoods Partnership (TNP)		
Contact name			
Contact address			
Contact number		e-mail	
Organisation type	Not for profit organisation <input checked="" type="checkbox"/> Parish/town council <input type="checkbox"/> Other, please specify		

2 - Your project

In which community area does your project take place? (Please give name – see section 3 of the grants pack)	Trowbridge Community Area
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).	The TNP is working to encourage its members (the TARAs and RAs) to increase the number of local residents who are aware of the role and work of the their local Association. We are encouraging all to produce periodic Newsletters and flyers for their events and the printers are needed to print them
Where will your project take place?	Longfield, Bradley Gardens and Newtown.
When will your project take place?	Immediately
How many people will benefit from your project?	3600 local residents in the 3 areas
How does your project demonstrate a direct link to the community plan for your area? Please provide a reference/page no.	By increasing the involvement of local people in improving their local area we will improve the quality of life of all in their areas P1 Intro; 2.1; 2.6; 3.1;3.3; 5.1;5.4;

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

Greater local involvement in improving the areas in which they live, in helping local people and in meeting the various agencies who deliver services in their area such that they can influence the service providers in tackling their particular issues.

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)

The Partnership meets every 2 months and during these meetings it has become clear that different groups were finding difficulties with publishing minutes and newsletters and in producing notices and flyers for their activities.

Having the ability to print their own minutes, newsletters, notices and flyers will enable the local associations to publicise their role and activities and involve more of the residents hopefully leading to more active members prepared to work to improve their local areas.

Any other information about your project.

This project is an example of how working in partnership does really work and is the forerunner of further joint projects to improve together more of the town.

3 - Management

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

Of these, how many are:

Over 50 years	Male	<input type="text" value="3"/>	Female	<input type="text" value="2"/>
25 – 50 years	Male	<input type="text" value="2"/>	Female	<input type="text" value="2"/>
Under 25 years	Male	<input type="text"/>	Female	<input type="text"/>
Disabled People	Male	<input type="text"/>	Female	<input type="text"/>
Black and Minority Ethnic people	Male	<input type="text"/>	Female	<input type="text"/>

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

The running costs and maintenance of the printers will be covered by the surpluses generated from their associations' activities.

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

This project would not happen.

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

When the associations attract more residents to their events and meetings.

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)?

No one at this time.

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: 31/03/2010

Month: March

Year: 2010

A - Total income:

£Nil

B - Minus total expenditure:

£Nil

Surplus/deficit for year: (A minus B)

£Nil

Free reserves held:

£Nil

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	
Brother MFC8370DN multi function (fax/copier/printer/scanner)* 3	£	Own fundraising/reserves		£550
@ £330.69 from IT247.com	£992	Parish/town council		£
	£			£0
Cost of printing Newsletters etc	£550	Trusts/foundations		£
	£			£0
	£	In kind		£
	£			£
	£	Other		£221
	£			£
	£			£
	£			£
	£			£
Total Project Expenditure	£1,542	Total Project Income		£771

Total project income B	£771
Total project expenditure A	£1,542
Project shortfall A – B	£771
Award sought from Wiltshire Council Area Board	£771
Bank Details	
Please give the name of the organisations' bank account e.g. Barclays	
Please give the title name of the organisations' bank account e.g. current	

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?

TNP and its members seek to involve all members of the local communities

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

By delivering minutes, newsletters, notices and flyers to local residents to increase local participation and in

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: 26/01/2011

Position in organisation:

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