

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 organisat				
Name of	Tisbury Commu	nity Safety Partnership		
organisation				
Contact name				
Contact address				
Contact number		e-mail		
Organisation type Not for profit or		rganisation 🗵 Parish/town council 🗌		
Other, please s		specify		
2 – Your project				
In which community a project take place? (Finame – see section 3 pack)	Please give	Tisbury, Mere and Wilton Community Area Divisions.		
Does your town/paris				
know about your proj	ject?	Yes ⊠ No □		
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).		To purchase and distribute Scam Wise Door Stickers to the elderly and vulnerable through the neighbourhood watch co-ordinaters and Police CBM Managers.		
Where will your project take place?		Parishes within Tisbury, Mere and Wilton Area Disisions		
When will your project take place?		21days from date of order.		
How many people will benefit from your project?		5,000		
How does your project demonstrate a direct link to the community plan for your area?		Community Safety awarness.		
Please provide a reference/page no.				

parish plans.	ct and other local _l	priorities? e.g. Priorities set by your area board and
Community Safety		
How did you discover there was a r community?	need for your proje	ct and how will your project benefit your local
	ragraphs – This se	ction is limited to 1200 characters only (inclusive of
	Watch Co-ordinato	rs and and Local Community Police.
Any other information about your p	roject.	
2 Managament		
3 - Management		
How many people are involved in the Of these, how many are:	ne management of	your group/organisation?
Over 50 years	Male	Female
25 – 50 years	Male	Female
Under 25 years	Male	Female
Disabled People	Male	Female
-		Temale
Black and Minority Ethnic people	Male	Female
fund it?	ue after the Wiltsh	ire Council funding runs out, how will you continue to
One off application.		

If you were not awarded the full amoun	t requested, what w	voul	d be the impact on your project?		
We do not hold funds fo projects and are unable to match fund.					
How will you know whether your project	t has made a differ	enc	e in the community?		
Feed back through neighbourhood watch and Community Police.					
Have you contacted Charities					
Information Bureau for help with your application/ to seek funding?	Yes	No			
uppnounce to containing.					
To who have you applied for funding for this project (other than Wiltshire	none				
Council)?					
Have you been successful?	Yes	No			
Have you or do you intend to apply	Yes	No			
for a grant from another area board within this financial year?					
If yes, please state which ones.					
Are you in receipt or anticipating other funding from Wiltshire Council	Yes	No			
for this project?					
4 - Information relating to your la	st annual accou	ınts	(if applicable)		
Year ending: 31st	Month: March		Year: 2011		
	Month: Waren		16di. 2011		
A - Total income:	£				
B - Minus total expenditure:	£				
Surplus/deficit for year: (A minus B)	£				
Free reserves held:	£				

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			
	£	Own fundraising/reserves	<u> </u>	£		
	£			£		
	£	Parish/town council		£		
	£	Trusts/foundations	+	£		
	£	Trusts/Touridations	-	£		
	£	In kind	1	£		
	£			£		
	£	Other		£		
	£			£		
	£			£		
	£		<u> </u>	£		
	£		<u> </u>	£		
Total Project Expenditure	£	Total Project Income		£		
Total project income B		£				
Total project expenditure A		£				
Project shortfall A – B		£				
Award sought from Wiltshire Council Arc	ea Board	£1,750				
Bank Details						
Please give the name of the organisations' bank account e.g. Barclays		Nat West Bank				
Please give the title name of the organisations' bank account e.g. current		Tisbury Community Safety Partnership				
6 - Supporting information - Please enclose the following documentation						
Enclosed (please tick)						
Written quotes including the one you a	☑ Written quotes including the one you are going to use					
Latest inspected/audited accounts or	Latest inspected/audited accounts or annual report					
☐ Income and expenditure budget for c	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 (b) reduce disadvantage?	services/facilities, and/or			
b) How does your project work to promote inclusion, participation and good	·			
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 specified, that I will complete a monitoring form (if requested) following comp				
$oxed{oxed}$ 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 project this application.	orior to submission of			
☐ That the necessary policies and procedures will be in place prior to the comm				
project outlined in this application. Child Protection Public Liability				
	Insurance			
project outlined in this application. Child Protection Public Liability Equal opportunities Access audit Environ	Insurance			
project outlined in this application. Child Protection Public Liability Equal opportunities Access audit Environ	Insurance nmental impact Inted (date)			
project outlined in this application. Child Protection Public Liability Equal opportunities Access audit Environ Planning permission applied for (date) or gra That acknowledgement will be given of Wiltshire Council support in any public	Insurance Inmental impact Inted (date) City, printed or website			
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project outlined in this application. Child Protection Public Liability Equal opportunities Access audit Environ Planning permission applied for (date) or gra That acknowledgement will be given of Wiltshire Council support in any public material. I give permission for press and media coverage by Wiltshire Council in relations.	Insurance Inmental impact Inted (date) Inted; printed or website Into this project.			