Item No.14 Appendix 2



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	Newtown School Trowbridge						
organisation							
Contact name							
Contact address							
Contact number			e-mail				
Organisation type	Not for profit or	rganisation 🛚	Parish/	h/town council 🗌			
	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)		Newtown School					
Does your town/paris	sh council						
know about your pro	ject?	Yes 🛚	No 🗌				
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).				de our changing facilities for the outdoor pool at the ows, doors and heating and a temporary cover over			
Where will your project take place?		Newtown School					
When will your project take place?		May 2010					
How many people will benefit from your project?		1000 people plus					
How does your proje a direct link to the co for your area? Please provide a refe	mmunity plan			tified in the Area Plan and in other reports such as sessment, County Play Strategy, Extended			

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

This complies and supports the reports above for more facilities for young people, it also supports the Ideals of Every Child Matters, Town Council Play Strategy 2009, government white paper on 'Creating more Community Facilities.

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)

There is currently no available booking time at the existing town pool for curriculum lessons and schools are forced to travel to other towns to meet there obligations to teach swimming within the national curriculum. In addition the costs of transporting school children to other towns make it uneconomic to do so which in turn puts strain on internal school budgets. As a community facility it will also meet the needs of other groups who are unable to use the public pool because they can be observed from the public viewing area. We have 10 schools signed up to use our facility from within Trowbridge

Any other information about your project.

This is a much needed and sought after project. It will be run and staffed by Active Trowbridge and the hope is that it will provide valuable revenue to the school which can be used to support other school projects. This project is innovative and has the support of the Town Council and Extended Schools Services in addition to the support of Area Heads.

3 - Management								
How many people are involved in the Of these, how many are:	management of your group/organisation? 3							
Over 50 years	Male Female							
25 – 50 years	Male 1 Female 2							
Under 25 years	Male Female							
Disabled People	Male Female Female							
Black and Minority Ethnic people	Male Female							
If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it? Once the work is carried out the project will be self sustaining through regular hire and its general maintence from that point will be covered within school budgets								
If you were not awarded the full amou	int requested, what would be the impact on your project?							
Without all the funding not all the project could be complete. It would mean that the pool would only be available during the summer and periods of good weather								
How will you know whether your proj	ect has made a difference in the community?							
Importantly is that we expect groups to come forward who for reasons already described would not wish to use a pool with a public gallery. At present the Trowbridge Pool cannot accommodate anymore school groups for lessons which means some school are either not offering lessons or are having to travel to other towns to use their facilities. This not only adds to the costs of swimming lessons but means the children are away from school longer than they should be.								
Have you contacted Charities Information Bureau for help with you application/ to seek funding?	r Yes □ No ⊠							
To who have you applied for funding for this project (other than Wiltshire Council)?	Awards for All							
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? If yes, please state which ones.	Yes	No				
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: 2009	Month: 31.03		Year: 2009			
A - Total income:	£879556					
B - Minus total expenditure:	£853362					
Surplus/deficit for year: (A minus B)	£26194					
Free reserves held:	£136755					

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			
Covered Area	£ 6,300	Own fundraising/reserves		£900		
Tiling Floor	£1,000			£		
Upgrade Changing Facilities	£ 5,000	Parish/town council		£		
	£			£		
	£	Trusts/foundations		£		
	£	In kind		£		
	£	In kind		£		
	£	Other		£		
_	£	Awards for All		£9,100		
	£			£		
	£			£		
	£			£		
Total Project Expenditure	£12,300	Total Project Income		£10,000		
Total project income B		£10,000				
Total project expenditure A		£12,300				
Project shortfall A – B		£2,300				
Award sought from Wiltshire Council Area Board		£2,300				
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 - Plea	ase enclo	se the following documenta	ation			
Enclosed (please tick)						
Written quotes including the one you a	are going to	use				
□ Latest inspected/audited accounts or	annual repo	ort				
	urrent financ	cial year				
Project budget (if applicable)						
☐ Terms of reference/constitution/group rules						
Evidence of ownership/lease of building	ngs and/or la	and				
For new groups, only the group's terms covering a period of 12 months is require		e and a projected income and ex	penditure	budget		

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? 						
A) Provides access to swimming for school children in Trowbridge which is currently unavaliable, provides access to swimming for community groups who require an unobseved swimming environments (islamic womens group) B) It will reduce cost and the need for coach hire for a group of schools						
b) How does your project work to promote inclusion, participation and good community relations?	b) How does your project work to promote inclusion, participation and good community relations?					
As already explained above						
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 minority ethnic groups (please state which groups)					
Specific faith groups (please state which groups) islamic						
□ 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						
☑ Planning permission applied for (date)31.01.2010or granted (date)						
\boxtimes 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: 29.03.2010						
Position in organisation:						
Please return your completed application to the appropriate Area Board Locality Team						