



## Community Area Grant Application Form 2012/2013

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

**To fund projects up to £1,000 without the need for matched funding**  
To fund up to 50% of projects costs of projects over £1,000  
Maximum Grant £5,000

For larger projects we strongly advise you to contact Charities Information Bureau three months before you approach the area board. (See Section 2 for contact details)  
Please contact your Community Area Manager before completing your application  
(See Section 3 for contact details)

### 1. Your organisation or group

Name of organisation	OLD SCHOOL DAY CENTRE MARKET LAVINGTON		
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

Project Title/Name	ENTERTAINMENT ENHANCEMENT PROJECT
What is your project about and what does it aim to achieve?  <i>Important: This section is limited to 600 characters only (inclusive of spaces).</i>	<p>PURCHASING EQUIPMENT TO ACHIEVE THE FOLLOWING:-</p> <ol style="list-style-type: none"> <li>1) UPGRADE OUR VISUAL PRESENTATION APPARATUS</li> <li>2) ENHANCE OUR MEMBERS ENJOYMENT OF VISUALLY PRESENTED INFORMATION / PHOTOGRAPHS</li> <li>3) EDUCATE OUR MEMBERS IN THE USE OF IT EQUIPMENT</li> <li>4) ENCOURAGE WIDER USE OF OUR EQUIPMENT BY OUR MEMBERS</li> </ol>

In which community area does your project take place? (Please give name - see section 3)	DEVIZES AREA BOARD		
I/we have discussed our project with the town/parish council?	Yes <input checked="" type="checkbox"/>	Date 30/3/2012	No <input type="checkbox"/>
I/we have discussed our project with our Wiltshire councillor?	Yes <input checked="" type="checkbox"/>	Date 17/4/2012	No <input type="checkbox"/>

Where will your project take place?	OLD SCHOOL DAY CENTRE TUESDAYS	
When will your project take place?	TUESDAYS & WHEN APPROPRIATE ON OUTINGS	
How did you discover there was a need for your project (please provide evidence) and how will your project benefit your local community?  <i>Important: Please do not type/write in paragraphs – This section is limited to 800 characters only (inclusive of spaces)</i>	<p>OUR MEMBERS ARE ASKING FOR ASSISTANCE WITH NEW TECHNOLOGIES &amp; EXPRESS A DESIRE TO LEARN IN A "NON-THREATENING" ENVIRONMENT E.G. DURING OUR WEEKLY SESSIONS.</p> <p>MEMBERS ARE FROM MARKET LAVINGTON AND THE SURROUNDING VILLAGES THIS EQUIPMENT WILL ENABLE MEMBERS WITH LIMITED MOBILITY KEEP IN CONTACT WITH OTHERS AND BUILD A STRONG COMMUNITY FEELING.</p>	
How many people will benefit from your project?	ALL CURRENTLY ATTENDING OUR DAY CENTRE (21) AND SUBSEQUENT MEMBERS	
How does your project demonstrate a direct link to the local community plan for your area (see <a href="http://www.wiltshire.gov.uk/areaboards">www.wiltshire.gov.uk/areaboards</a> ) or priorities of your area board?	WE AIM TO EQUIP OUR GROWING, AGEING POPULATION WITH IT SKILLS & THIS DESIRE IS MIRACED BY WILTSHIRE COUNCIL WHO "SUPPORT OLDER PEOPLE TO BE ACTIVE AND INVOLVED IN COMMUNITY LIFE".	
Please provide a reference/page no.		
Any other information about your project. (Limited to a 1000 characters)		
<p>WE HOPE THAT FAMILIARISATION WITH OUR LAPTOP, DIGITAL CAMERA, ETC. WILL RESULT IN OUR MEMBERS FEELING MORE COMFORTABLE WITH USING THE EQUIPMENT TO RESEARCH OTHER AREAS OF INTEREST AND BROADENING THEIR SOCIAL CIRCLE.</p> <p>MEMBERS WILL DECIDE AREAS THEY WISH TO PURSUE AND WE WILL INVITE GUEST SPEAKER TO HELP WITH THEIR IT SKILLS GROWTH.</p>		
<b>To be completed ONLY where town/parish councils are making an application</b>		
Is your project one which parish/town councils have powers to raise local taxes to fund?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Could your project be funded from your reserves?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is your project urgent (having to be completed in this financial year? If you answer YES please provide evidence elsewhere on the application form	Yes <input type="checkbox"/>	No <input type="checkbox"/>

### 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="1"/>	Female	<input type="text" value="9"/>
25 – 50 years	Male	<input type="text" value="/"/>	Female	<input type="text" value="/"/>
Under 25 years	Male	<input type="text" value="/"/>	Female	<input type="text" value="/"/>
Disabled People	Male	<input type="text"/>	Female	<input type="text" value="2"/>
Black and Minority Ethnic people	Male	<input type="text" value="/"/>	Female	<input type="text" value="/"/>

If your project will continue after the Wiltshire Council funding runs out, how will you continue to fund it?  
*THIS EQUIPMENT WILL HELP US TO INCREASE THE COMMUNITIES AWARENESS OF US BY ENABLING US TO PROMOTE OURSELVES WITH NEWSLETTERS, POSTERS AND HOPEFULLY OUR OWN WEBSITE THIS IN TURN WILL INCREASE SUPPORT FOR OUR FUNDRAISING EVENTS.*

How will you know whether your project has made a difference in the community? What information will be collected to enable you to know that the project has made a positive impact on your community and met the local need?

- *WHEN MEMBERS FEEL EMPOWERED/EQUIPED TO CONTINUE USING THEIR NEW FOUND SKILLS OUTSIDE THE DAY CENTRE PART*
- *WHEN THE EQUIPMENT BECOMES AN INTEGRAL OF THE MAJORITY OF OUR ACTIVITIES*
- *WHEN WE PRODUCE OUR FIRST NEWSLETTER*
- *WHEN WE HAVE AN ACTIVE WEBSITE SUPPORTED/RUN BY OUR MEMBERS*

Has Charities Information Bureau (CIB) helped you with this application/to seek funding for this project?

Yes  Date contacted CIB *APRIL 2012* No

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

Name of Funder	Amount Applied For	Amount Received
<i>GANNET FOUNDATION</i>	<i>£ 874.00</i>	<i>UNSUCCESSFUL</i>

Please list with amount applied for and whether you have been successful

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 one(s).

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

Yes  No

4. Information relating to your last annual accounts (if applicable)		
Year ending:	Month: DEC	Year: 2011
A - Total income:	£ 8,548.43	
B - Minus total expenditure:	£ 9,240.28	
Surplus/deficit for year: (A minus B)	£ - 691.85	
Free reserves currently held (i.e. money not committed to other projects/operating costs)	£ 3,120.00	

5. Financial information – If you can claim back V.A.T. please exclude VAT from the figures you provide us. If you have to pay the V.A.T then please include V.A.T. in the figures you provide us.

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)		
			PIC	
LAPTOP COMPUTER	ENRICO NSC40 BTS	£ 329.00	Own fundraising/reserves	£
COMPUTER SOFTWARE	OFFICE SOFTWARE	£ 120.00		£
DIGITAL CAMERA	NIKON COOLPIX S9100	£ 199.00	Parish/town council	£
DIGITAL PROJECTOR	AS YET UNDEFINED	£ 150.00		£
PRINTER	CANON PIXMA ME5250	£ 76.00	Trusts/foundations	£
		£		£
		£	In kind	£
		£		£
		£		£
		£	Other	£
		£		£
		£		£
Total Project Expenditure		£ 874.00	Total Project Income	£
Total project income B		£	N/A	
Total project expenditure A		£ 874.00		
Project shortfall A – B		£	—	
Grant sought from Wiltshire Council Area Board		£ 874.00		
Bank Details				
Please give the name of the organisations' bank account e.g. Barclays				
Please give the name of the organisations' bank account e.g. Chippenham Scouts				

**6. Supporting information – Please enclose all the following documentation as failure to do so may lead to a delay in your application being considered**

Enclosed (please tick)

- All written quotes including the one(s) you are going to use
- Latest inspected/audited accounts or annual report or Income/expenditure budget for current financial year
- 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. Declaration (on behalf of organisation or group) – I confirm that...**

- This application meets all 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 a grant is received, I will provide copies of all receipts and invoices associated with the grant and provide information and photographs to demonstrate how the grant was spent.
- That any other form of licence or approval for this project has been received prior to submission of this grant application.
- That the necessary policies and procedures will be in place prior to the commencement of the project outlined in this application.
- Child Protection     Safeguarding Adults
- 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:

Position in organisation: *CO-ORDINATOR*

*9/05/2012*

Please return your completed application to the appropriate Area Board Locality Team (see section 3)