Item No. 14a



## 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 Tow	n Council				
Contact name						
Contact address						
Contact number			e-mail			
Organisation type	Not for profit or	ganisation 🗌	Parish/	town council ⊠		
	Other, please s	pecify				
2 – Your project						
In which community area does your project take place? (Please give name – see section 3 of the grants pack)		Trowbridge				
Does your town/parish council know about your project?		Yes ⊠	No 🗆	]		
What is your project?		Provision of a bench located outside Trowbridge Register Office.				
Important: This section is limited to 300 characters only (inclusive of spaces).						
Where will your project take place?		Trowbridge				
When will your project take place?		October 2010				
How many people will benefit from your project?		11,500				
How does your project demonstrate a direct link to the community plan for your area?		Be more effective through joint working across authorities and agencies				
Please provide a reference/page no.		Page 3				

, , ,	ct and other local priorities? e.g. Priorities set by your are	a board and		
parish plans.  This bench will offer a resting place for	users both of the the Register office and general residents	in the vicinity.		
51	9	,		
How did you discover there was a n community?	eed for your project and how will your project benefit y	our local		
	agraphs – This section is limited to 1200 characters on	ly (inclusive of		
This bench has been requested follo	owing discussion between the Registrar and the Mayor			
is anticipated that this bench will be used by a full range of people using the register office, celebrating marraiges, births and citizenship ceremonies. It was also acknowledge that it will also allow an area for				
quiet contemplation outside the bui	ding.			
Any other information about your p	roject.			
,	.,			
3 - Management				
	e management of your group/organisation?			
Of these, how many are:				
Over 50 years	Male 12 Female 1			
25 – 50 years	Male Female			
Under 25 years	Male Female			
Disabled People	Male Female			
Disale and Minority Ethnia manua	Mala Famala Famala			
Black and Minority Ethnic people	Male Female			
If your project is intended to continution it?	ue after the Wiltshire Council funding runs out, how wil	you continue to		
	going basis by Trowbridge Town Council.			

If you were not awarded the full amount requested, what would be the impact on your project?					
This project would not go ahead and visito for weddings to start, breaks in Citizenship			will continue to have nowhere to sit whilst waiting		
	o conomico ana n	٥	, ioi appointment times.		
How will you know whether your project	et has made a diffe	ranc	e in the community?		
How will you know whether your project has made a difference in the community?  We expect to receive feedback from the users of the Register office via the Registrar and his clerk.					
			a via a voga a va a via a v		
	<u> </u>				
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)?					
Have you been successful?	Yes	No	$\boxtimes$		
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 la	st annual acco	unts	s (if applicable)		
Year ending: 31/03/2009	Month: March		Year: 2009		
A - Total income:	£1,738,917.00				
D. Minus total averagelitims					
B - Minus total expenditure:	£1,743,865.00				
Surplus/deficit for year: (A minus B)	£(4948)				
Free reserves held:	£254,122.00				

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			
Bench purchase and delivery	£589	Own fundraising/reserves		£		
Installation	£50			£		
	£	Parish/town council	С	£320		
	£			£		
	£	Trusts/foundations		£		
	£			£		
	£	In kind		£		
	£	Others		£		
	£	Other		£		
	£			£		
	£			£		
	£			£		
Total Drainet Evanaditure	£639	Total Project Income		£320		
Total Project Expenditure	1 2039	Total Project Income		1 2320		
Total project income B		£320				
Total project expenditure A		£639				
Project shortfall A – B		£319				
Award sought from Wiltshire Council Ar	rea Board	£319				
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 - Ple	ase enclo	se the following documenta	ation			
Enclosed (please tick)						
	are going to	use				
□ Latest inspected/audited accounts or	∠ Latest inspected/audited accounts or annual report					
☐ Income and expenditure budget for o	current finan	cial 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:	
<ul> <li>a) How does your project work to either (a) promote equality and access to services/facilities, and/or (b) reduce disadvantage?</li> </ul>	•
This improves equality and access to services/facilities	
b) How does your project work to promote inclusion, participation and good community relations?	
It encourages people to use the bench, an opportunity to converse with different people	
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	
<ul> <li>☑ I have read the funding criteria</li> <li>☑ 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.</li> </ul>	
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