Item No. 14b

Wiltshire Council

Where everybody matters

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	tion or group				
Name of organisation	Trowbridge Ran	gers Football Club)		
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 area			
Does your town/parish council know about your project?		Yes 🛛 No 🗌			
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).		We are a new football club, primarily for young people, in Trowbridge aiming to increase participation in football for all abilities. We need to train enough qualified volunteer coaches to run the different age groups so we wish to apply for funding for the relevant coaching/child welfare courses.			
Where will your project take place?		Main base is Southwick playing field + usage of Staverton playing field			
When will your project	ct take place?	Tuesday evenin	gs and S	aturday mornings	
How many people wil your project?	l benefit from	200+			
How does your project demonstrate a direct link to the community plan for your area?		Community Safety - reducing anti-social behaviour, encouraging community links and building relationships for the future of the club and the town.			
Please provide a refe	rence/page no.				
		15			

	ect and other local priorities? e.g. Priorities set by your area board and
parish plans. Reduction of anti-social behaviou	r, inter-community links, education and exercise for all.
How did you discover there was a r community?	need for your project and how will your project benefit your local
	ragraphs – This section is limited to 1200 characters only (inclusive of
	her local football clubs and found that at the end of the football
	s better players joined.We run mixed ability teams no one gets When we get enough to start a second team thats what we intend to do
Any other information about your p	
	tarted to compete for the best players in and around the town, we are
	is available to all ages/genders and abilities within the town. We
need to have sultably qualified co	oaches in order that we can become an F.A. Chartered Standard club.
3 - Management	
	he management of your group/organisation? 0
Of these, how many are:	
Over 50 years	Male Female
25 – 50 years	Male 15 Female 5
Under 25 years	Male Female
Dischlad Baspla	Male Female
Disabled People	Male Female
Black and Minority Ethnic people	Male Female Female
If your project is intended to contin fund it?	ue after the Wiltshire Council funding runs out, how will you continue to
	once the coaches are trained they should not need to attend training in the
	y memberships and weekly subs and we are starting a fundraising committee

and are constantly looking for new sponsors and external grant funding opportunities.

If you were not awarded the full amount requested, what would be the impact on your project?					
There would be a huge impact on the children, if we can't receive the funding requested we will be unable to get the coaching courses required by the Football Association and will be unable to offer more spaces in groups or start new age groups.					
How will you know whether your project	How will you know whether your project has made a difference in the community?				
The success of the project will be guaged on membership and families participation.					
	Γ				
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				
Have you or do you intend to apply for a grant from another area board within this financial year?	Yes 🗌 No	\boxtimes			
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	ist annual accounts	s (if applicable)			
Year ending:	Month:	Year:			
A - Total income:	£ 0. 00				
B - Minus total expenditure:	£ 0. 00				
Surplus/deficit for year: (A minus B)	£ 0. 00				
Free reserves held:	£ 0. 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)			
	0-10		P/C	•	
6 x Level 1 coaching courses	£ 540	Own fundraising/reserves		£	
1 x Level 1 goal keeper course	£130	Derich // aussi a aussi a		£	
6xSafe Guarding children courses	£120	Parish/town council		£	
6 x Child Welfare courses	£150			£	
1 x First Aid course	£ 40	Trusts/foundations		£	
	£			£	
	£	In kind	-	£	
	£			£	
	£	Other		£	
	£			£	
	£			£	
	£			£	
	£			£	
Total Project Expenditure	£ 980	Total Project Income		£	
Total project income B		£0			
Total project expenditure A		£980			
Project shortfall A – B		£980			
Award sought from Wiltshire Council Area Board		£ 980			
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 enclos	se the following documentati	on		
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 a	and expenditure budget
covering a perio	od of 12 months is requi	red.		

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?
We are open to all abilitys, ages, gender and cultures
b) How does your project work to promote inclusion, participation and good community relations?
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:
Position in organisation:

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