

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	tion or group				
		Discours Oak as II			
Name of PTA - Corsham		Primary Schooli			
organisation					
Contact name					
Contact address					
Contact number		e-mail			
Organisation type	Not for profit or	rganisation 🗵 Parish/town council 🗌			
	Other, please s	pecify			
2 - Your project					
In which community a project take place? (F name – see section 3 pack)	Please give of the grants	Corsham			
Does your town/parish council					
know about your proj	ject?	Yes ⊠ No □			
What is your project? Important: This section 300 characters only (spaces).	on is limited to	A large timber play den and sun shelter. A quiet space out of the sun to sit together and socialise or sit quietly. Particularly helpful for the 140 special needs children who often find boisterous areas difficult. Will also be used by community/parents who attend our public evening classes.			
Where will your proje	ct take place?	Playground at Corsham Primary			
When will your project	ct take place?	as soon as possible			
How many people wil your project?	I benefit from	420 children plus approx 30 adults			
How does your project demonstrate a direct link to the community plan for your area?		Our project is a direct link to point 6 - particularly around provision for children & after school clubs & adults attending lifelong learning classes			
Please provide a reference/page no.		page 9.			

What is the link between your project and other local priorities? e.g. Priorities set by your area board and parish plans. Our local area board has identified education and lifelong learning as one of the local priorities. After school clubs & provision of lifelong learning for adults were among those priorities. The shelter provides a place for adults & children to meet before & after these clubs, classes, meetings.						
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) We have had shelters in place for some time, but these have worn down and need replacing. We know that they are valued by everyone, the children pre, during and after school; and by adults attending our evening classes (IT, salsa, yoga etc). We have many adults attend our lifelong learning classes and 420 children, many of whom also use the before and after school clubs. These shelters provide an essential place not only to escape weather elements, but to sit, meet and socialise.						
Any other information about your p						
http://www.timberline.co.uk/index.php	http://www.timberline.co.uk/index.php?mod=product&id_prd=219					
We strive to give children and adults a after school clubs are essential for ma						
wellbeing. At the same time parents a We plan to find funding for further she	and adults need place	s to meet away from from the	e actual class or meeting.			
we plan to find funding for further site	siters. The shellers w	e wish to purchase are sturu	y and long lasting.			
3 - Management						
How many people are involved in the Of these, how many are:	ne management of y	our group/organisation? 27	7 †			
Over 50 years	Male	Female				
25 – 50 years	Male 1	Female 24				
Under 25 years	Male	Female 2				
Disabled People	Male	Female				
Black and Minority Ethnic people	Male	Female 1				
If your project is intended to continuous fund it? This funding will pay for one really good to the second		_	-			
towards the next shelter and we will c						

If you were not awarded the full amount	t requested, what v	voul	d be the impact on your project?			
There would be no substantial, safe, long lasting shelter for children and parents if we did not receive the funding at all. We have raised a small amount towards another one (see further along) but in todays economic climate it is difficult for the PTA to find funding for projects like this.						
How will you know whether your project	et has made a diffe	renc	e in the community?			
By observing the usage by children and adults. By asking for feedback from those attending clubs etc before and after school and in the evenings. Please note we have discussed this project with a member of the community area network.						
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)?	no-one					
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				
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	(if applicable)			
Year ending: Sept 10	Month: 1/10/09		Year: 30/9/10			
A - Total income:	£10,838.63					
B - Minus total expenditure:	£5309.51					
Surplus/deficit for year: (A minus B)	£5529.12					
Free reserves held:	£1000					

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		
supply, inside decking	£1000	Own fundraising/reserves	С	£	
delivery	£ 0			£	
	£	Parish/town council		£	
	£			£	
	£	Trusts/foundations		£	
	£	La Lind		£	
	£	In kind		£	
	£	Other		£	
	£	Other		£	
	£			£	
	£			£	
	£			£	
Total Project Expenditure	£1000	Total Project Income		£0	
Total project income B		£0			
Total project expenditure A	£1,000				
Project shortfall A – B		£1,000			
Award sought from Wiltshire Council	£1000				
Bank Details					
Please give the name of the organisa account e.g. Barclays	tions' bank				
Please give the title name of the orga bank account e.g. current	nisations'				
6 - Supporting information - P	Please enclo	ese the following document	ation		
Enclosed (please tick)					
Written quotes including the one y	ou are going to	use			
□ Latest inspected/audited accounts	ort				
☐ Income and expenditure budget for	cial year				
Project budget (if applicable)					
☐ Terms of reference/constitution/gr					
⊠ Evidence of ownership/lease of but	ildings and/or	land			
For new groups, only the group's term covering a period of 12 months is required.		ce and a projected income and ex	kpenditur	e budget	

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? 				
Our project strives to provide a safe place to rest and socialise for all sectors of our community: particularlyfor our special needs children and is open for any adult using our facilties.				
b) How does your project work to promote inclusion, participation and good community relations?				
The shelter encourages individuals to meet and talk and encourage those who are not necessarily confident at meeting others and allows individuals of all ages to talk to each other, whatever their background.				
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				
☐ Planning permission applied for (date) or granted (date)				
$oxed{\boxtimes}$ 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: Jo Greatwich Date: 14/10/2010				
Position in organisation: Chair of PTA				