



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	Larkhill Primary School		
Contact name			
Contact address			
Contact number	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: center;">e-mail</td> </tr> </table>		e-mail
	e-mail		
Organisation type	Not for profit organisation <input checked="" type="checkbox"/> Parish/town council <input type="checkbox"/> 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)	Amesbury		
Does your town/parish council know about your project?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).	Larkhill School would like to operate, on behalf of the local community, a Sensory Toy Library for parents of children between 4 and 11 who live in the area		
Where will your project take place?	Larkhill		
When will your project take place?	As soon as funding is available		
How many people will benefit from your project?	Families in Larkhill		
How does your project demonstrate a direct link to the community plan for your area? Please provide a reference/page no.	This project has strong local support and will help families to access services including health, education, social care and army welfare.		

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

The project will create a stronger and more inclusive community as it will give parents strategies to respond to their child's reactions to certain situations, increasing parents' confidence and helping them to manage the pressures of raising a child with SEN.

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)

Support for this project is great, and the need for such provision has been identified by a number of professionals and organisations as well as parents. Professionals/agencies who identify the need and support the scheme include the Parent Support Advisor, School Nurse, Health Visitor, Educational Psychologist, and the local Children's Centre.

Any other information about your project.

The membership database to emerge from this scheme could lead to the development of a support group for parents facing similar challenges so that they can provide mutual support. The project will help young people to succeed at school and take part in community activities outside of school, as the sensory toys will help the children to develop emotional security more quickly and therefore help them to spend less time excluded from the classroom, community and family activities.

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

If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it?

Through a £1 membership fee to pay for a £25 annual printing and copying of membership forms, evaluation/monitoring and posters to promote the scheme.

If you were not awarded the full amount requested, what would be the impact on your project?

It could not proceed.

How will you know whether your project has made a difference in the community?

A wellbeing survey will be carried out to assess the benefits for those accessing the new service. Information from the child's performance in school will also be used to assess the benefits. A simple monitoring form will be designed.

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)?

Durington Parish Council - declined as all funding allocated

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 last annual accounts (if applicable)

Year ending:

Month: 03

Year: 2010

A - Total income:

£ 893,965.00

B - Minus total expenditure:

£887061.00

Surplus/deficit for year: (A minus B)

£6904.00

Free reserves held:

£64547.00

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	
Toys for the Sensory Toy Library	£999.96	Own fundraising/reserves		£
	£			£
	£	Parish/town council		£
	£			£
	£	Trusts/foundations		£
	£			£
	£	In kind		£
	£			£
	£	Other		£
	£			£
	£			£
	£			£
Total Project Expenditure	£999.96	Total Project Income		£0
Total project income B		£0		
Total project expenditure A		£999.96		
Project shortfall A – B		£999.96		
Award sought from Wiltshire Council Area Board		£999.96		
Bank Details				
Please give the name of the organisations' bank account e.g. Barclays		Lloyds TSB		
Please give the title name of the organisations' bank account e.g. current		Current		
6 – Supporting information – Please enclose the following documentation				
Enclosed (please tick)				
<input checked="" type="checkbox"/> Written quotes including the one you are going to use <input checked="" type="checkbox"/> Latest inspected/audited accounts or annual report <input checked="" type="checkbox"/> Income and expenditure budget for current financial year <input type="checkbox"/> Project budget (if applicable) <input type="checkbox"/> Terms of reference/constitution/group rules <input type="checkbox"/> 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:

a) How does your project work to either (a) promote equality and access to services/facilities, and/or (b) reduce disadvantage?

This project will help to improve the sense of inclusiveness for children with SEN in the area

b) How does your project work to promote inclusion, participation and good community relations?

Children and families will have an enhanced sense of feeling included and that they are able to participate in local community and school activities.

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) SEN

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