

“Your Community - Our Support”

Grant Application from North Wiltshire District Council Community Award Scheme

**Please ensure you have read the Community Award Scheme Guidance Notes before completing this form
ALL SECTIONS MUST BE COMPLETED, OR YOUR APPLICATION WILL NOT BE CONSIDERED.**

Section 1 – Tell us About Your Organisation or Group

Name of Organisation:- Calne Family Action Group

Name of Contact Person:-

Contact Address:-

Daytime Contact Number:-

Email:

Are you applying as (please tick)

non-profit making organisation

other

Local Auth.

Section 2 – Tell us about your Project

In which Community Area will your project be taking place? (Please tick) Please refer to map in pack

1

2

3

4

5

District-wide

In which Parish Council area will your project take place? Calne Within

Which Community Area Funding Priority does your project seek to address? (see covering letter)

Facilities and activities for young people

If successful, how will you spend your grant (e.g. erect a youth shelter)?

On activities for children and their families living in disadvantaged circumstances.

What does your project aim to achieve?

Our project aims to provide activities for children in holiday times, which they'd otherwise not have the opportunity to participate in due to lack of resources within families. Families targeted are on low incomes, often on long term benefits and often experiencing difficulties within the families such as alcohol and drug abuse or relationship breakdowns or long term illness.

What sort of funding are you applying for? (please tick)

Capital > £500

Revenue

If you are applying for a Revenue award could you guarantee that the Project can be completed by 31 March 2006? (please tick)

Yes
 No

If there are on-going running costs to your project please tell us how these will be met in future (not by NWDC)

N/A

How will this project benefit local people and approximately how many will benefit?

20 – 100 plus depending on activities. Provides disadvantaged local people with activities that they'd otherwise not get the opportunity to participate in, provides a network support for disabled and disadvantaged children and their families.

What other Agencies/Groups/Organisations are involved in this project?

Barnardos

Has your organisation received a previous grant award from this Council (please tick)	<input type="checkbox"/> Yes (If yes, please provide details below) <input type="checkbox"/> No <input type="checkbox"/> Not Sure
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What was the previous project about?

Amount of Grant Awarded:-	Date/Year of Award:-
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Section 3 - Additional information to support your application e.g. consultation & community involvement

The activities give the parents a much needed break at a time when resources are stretched. The group provides a service which is free or a minimal expense for parents and carers and for this reason the project is unique to the area.

Section 4 - Tell us about the financial aspects of your application (complete in full)

Project Costs – please provide <u>full</u> break down e.g. equipment, installation etc.		Project Income - please list sources of funding for this project, indicating whether provisional (P) or confirmed (C)		
			P/ C	£
Ticklish Allsorts (arts workshop)	£180.00	Parents contributions	C	£187.00
Easter crafts workshop	£140.00			£
Cinema Tickets	£182.40			£
Coach Hire	£105.00			£
Hire of Hall	£ 80.00			
Total Project Expenditure	£687.40	Total Project Income		£187.00
Project Shortfall (Expenditure - Income)	£500.40	GRANT NOW SOUGHT FROM NWDC		£500.40

FAILURE TO PROVIDE THE FOLLOWING INFORMATION WITH THIS FORM WILL CAUSE YOUR APPLICATION TO BE REJECTED AND RETURNED TO YOU

Please tick this box to indicate that you have included a copy of last year's financial accounts (unless newly formed group).
Please tick this box to indicate that you have included some financial evidence or comparative quotes related to the project/equipment outlined in your application where necessary.

Section 5 - Declaration (on behalf of organisation or group)

I confirm that the information on this form is correct, that any grant received will be spent on the activities specified, that I will complete a monitoring form (if requested) at the completion of the project
I confirm if a grant is received that I will complete and return an evaluation sheet.
I confirm that if necessary any planning permission, or any other form of licence or approval for this project has been received prior to submission of this application
I confirm that the necessary policies and procedures will be in place e.g. Child Protection, Public Liability Insurance , Equal Opportunities etc prior to the commencement of the project outlined in this application