

Reference no

Log no

For office use

Area Board Projects and Councillor Led Initiatives Application Form 2014/2015

To be completed by the Wiltshire Councillor leading on the project Please ensure that you have read the Funding Criteria before completing this form PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED 1. Contact Details Area Board Name South West Wiltshire **Your Name** Led by Cllr Jose Green 01722 714645 **Contact number** e-mail jose.green@wiltshire.gov.uk 2. The project **Project Title/Name** Local First Aid Planning Please tell us about the project /activity South West Wiltshire Area Board hosted a community planning event on 30 April 2014. The you want to number one priority for community safety voted by those who attended the event was to organise/deliver and 'improve the number of first aid trained people in Towns and Villages and access to lifesaving equipment such as community defibrillators'. This project is to fund three free why? introduction sessions showcasing basic first aid and how to use a defibrillator, to be run by Important: This section St John Ambulance; one will take place in each of the Mere, Tisbury and Wilton community is limited to 900 areas. Parishes will then be encouraged to consider a local strategy for basic first aid training, identifying key individuals to be trained.. It may also be appropriate for parishes to characters only (inclusive of spaces). consider whether a defibrillator would be suitable for their area. Where is this project taking place? Across the Mere, Tisbury and Wilton community areas When will the project take place? January 2015 onwards What evidence is there that this Priority set through community consultation event. project/activity needs to take place/be funded by the area board?

How will the local community benefit?	- More resilient communities, with local people able to react to any first aid		
	situation.		
	- Improved strategic approach to first aid response in local parishes.		
Does this project link to a current	No		
Community Issue? (if so, please give			
reference number as well as a brief			
description)			
	Yes - community safety priority set at com	munity planning e	event in April
•	14		
(if so, please provide details)			
What is the desired outcome/s of this proje			
- Local parishes to consider community approach to first aid, training identified local people in basic first aid and helping			
to create a more resilient community response.			
- Local parishes to explore whether a community defibrillator would be suitable in their area.			
Who will be responsible for managing this project? Community Area Manager			
Community Area Manager			
3. Funding			
3. I dildilig			
What will be the total cost of the project?	£ 450		
Trinks trim be the testal each or the project.			
How much funding are you applying for?			
	£ 450		
			Ι
If you are expecting to receive any other funding for your project, please give details	Source of Funding	Amount	Amount
		Applied For	Received
Please give the name of the organisation			<u>l</u>
and bank account name (but not the			
number) your grant will be paid in to.			
(N.B. We cannot pay money into an			
individual's bank account)			
4 Declaration Loopfirm that			
4. Declaration – I confirm that			
☐ The information on this form is correct and that any grant received will be spent on the activities			
specified			
project outlined in this application	approvation and project will be in place		
. ,	D-4 00/44/0044		
Name: Jose Green	Date: 28/11/2014		
Position in organisation: Wiltshire Councillo	ur		
Please return your completed application to the appropriate Area Board Locality Team (see section 3)			
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