

Rossendale Council Grant

APPLICATION FORM (2015/16 and 2016/17)



For Office Use Only		
Application number		
Date Received		
Funding Requested		
Funding Granted		
Content checked by		
Correspondence	Acknowledgement Sent	
	Date/s to be paid	
	Date/s Sent to Finance	
	6 months monitoring complete	
	12 months monitoring	
	Supporting documentation received	

Section 1: Your organisation (complete in block capitals)

Name of your organisation:	
Main contact person:	
Full postal address of your organisation:	
Telephone no:	Mobile no:
Email address:	Website address:
Secondary contact name and number:	

If you are a not for profit organisation/residents group/community group, please attach a signed copy of your constitution to this document.

Section 2: Funding Request

How much Rossendale Council Grant funding are you requesting?

Section 3: Financial Information

Banking details: Please give your organisation's banking details

Account name	_____		
Account no.	_____	Sort code	_____

Section 4: Questions

Please answer all questions below, attaching where necessary all additional information requested. Please see **GRANT GUIDANCE AND CRITERIA FORM (2015/16 – 2016/17)** for additional support.

Question 1: Equality and Access to Services

Please attach your organizations Equality Statement.

Please clearly demonstrate how your project /service supports or promotes equality of opportunity and/or addresses specific inequalities? (250-350 words)

(For an explanation please consult the grant guidance and criteria form)

Please consider the aims below:

- 1) To eliminate unlawful harassment and victimisation and other conduct prohibited by the Equality Act.
- 2) Advance equality of opportunity between people who share a protected characteristic and those who do not.
- 3) Foster good relations between people who share a protected characteristic and those who do not.

Question 2: Project/Organisation Overview

Please give an overview of what your project/organisation does and what the funding is required for.

You must demonstrate a track record of working in partnership to deliver services which support the aims of the Rossendale Financial Inclusion Group – 'To improve financial inclusion in the Borough through a more co-ordinated approach to debt recovery, access to welfare benefits, access to financial services, prevention of problem debt and the provision of money advice'.

Applicants must also have experience of working with Rossendale residents and have local knowledge of the issues facing the different communities within the Borough.

(350-500 words)

Question 3: What is the funding for and what outcomes will it deliver

Please detail what you require funding for and how it will help to enable people who live and work in Rossendale to:

- Manage their money on a day-to-day basis, effectively, securely and confidently.
- Plan for the future and cope with financial pressure, by managing their finances to protect against short-term variations in income and expenditure and to take advantage of longer-term opportunities: and
- Deal effectively with financial distress, should unexpected events lead to serious financial difficulty.

Please also explain how the funding could help your organization to support people to become capable of using and benefiting from the internet to help them manage their money and plan for the future (digital inclusion).

(350-550 words)

What will be the outcomes and how will you report/evaluate these to us? At least one outcome must relate to partnership working with other organisations to deliver financial inclusion services.

1.

2.

3.

4.

5.

Question 4: Value for Money and Added Benefits

Please attach a breakdown of costs, with a clear outline of where additional funding will be sourced from. Also indicate if this grant will help to draw in further funds.

Breakdown:

Additional Funding:

Name of other funder (include organisations own money if being used)	How much?	Have you secured this funding, waiting to hear or is it dependent on getting other funding?
e.g. Community Aid North West	£900	Waiting to hear

Can you demonstrate:

1) That the same services could not be achieved for less, including delivery by the Council. (250-350 words)

Can you demonstrate:

2) The added value the project will bring with it, for example through volunteer time. (250-350 words)

Can you demonstrate:

3) That the project provides a unique 'selling point' for Rossendale and potentially beyond. (250-350 words)

Question 5: Sustainability

What is the projects exit strategy or what is the organisations plan for seeking future funding or generating self sustaining incomes. (250-350 words)

Question 6: Project Development and Potential Risks

Is there a risk if this project is not delivered/funded? Please explain (250-350 words)

What would be the risk if the project fails and how do you intend to mitigate/manage against that risk? (250-350 words)

Question 7: Partnerships

What other partners does the project/organisation work with? Applicants must demonstrate a track record of working in partnership with other organisations to deliver services.

Please give brief details of each partnership link and explain how each partnership works.

Who You Work With	How You Work With Them

Section 5: Check List

Have you: Please tick

- | | |
|-----------------------------------|---|
| Attached your constitution | — |
| Included your Equality Statement | — |
| Completed all questions | — |
| Included the groups bank details | — |
| Signed and dated the sheet | — |
| Posted a hard copy with all forms | — |
| Emailed a copy | — |

Section 6: Signatures

Declaration

I/we confirm that I/we are authorised to sign this declaration on behalf of the organisation named in this application at 1. I/we certify that the information given in this application is true, and confirm that the enclosures are current, accurate, and adopted or approved by the organisation/consortium for which I/we are taking the lead. I/we understand that any offer of a grant will be subject to terms and conditions. I/we confirm that the organisation has the authority to accept this grant if the application is successful, and that it is repaid if the conditions of the grant are not met.

Signatory – Main contact named

I understand that you may contact me during the funding period and throughout the year of the grant and I confirm that I am authorised by the organisation/partnership for this purpose, and that you may rely on any further information I supply to you.

Signed:

Please print name:

Date:

Name of organisation:

Closing date for applications is 12 noon, 7 January 2015