



**Transforming the Trent Valley Community Grants Scheme**

**Application Form**

**Please ensure you read the accompanying guidance prior to completing this application form. Answer all questions and enclose all documents requested.**

(If you type this form the text boxes will expand)

**If you need any assistance in completing this form, please contact the Community Engagement Officer at** [**Nicola.lynes@supportstaffordshire.org.uk**](mailto:Nicola.lynes@supportstaffordshire.org.uk) **or 07837 127165.**

**SECTION 1. ABOUT YOUR ORGANISATION**

**1a**. **Name and address of your organisation**

* Give your official or registered address.
* The name should be the same as on your constitution.

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Organisation’s website/social media tags (if you have one):

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**1b. Details of main contact person**

This must be the person who can talk about your application in detail.

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| --- | --- |
| Name: |  |

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| --- | --- |
| Position: |  |

Address (if different from Q1a):

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| --- |
| Full postcode: |

|  |  |
| --- | --- |
| Daytime phone number (include area code): |  |

Email address (this will be our first point of contact):

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**1c. Legal status of your group**

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| --- | --- |
| When was your organisation formed? |  |

How would you describe your group: e.g. constituted voluntary/community group; school; Parish Council; registered charity; social enterprise?

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| Registered Charity Number (if applicable): |  | Registered Company Number (if applicable): |  |

**1d. Describe your organisation’s main purpose and regular activities** – approx. 100 words

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**1e. Banking Arrangements**

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| --- | --- | --- | --- | --- |
| Does your organisation have a bank account? | Yes |  | No |  |
|  |  |  |  |  |
| Does this bank account require the signatures of two unrelated people, living at separate addresses to access the account? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1f. Are you VAT registered?** | Yes |  | No |  |

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| --- | --- |
| If yes, give your registration number: |  |

Please remember that if you are registered for VAT, you cannot apply for the cost of recoverable VAT.

**SECTION 2. ABOUT YOUR PROJECT**

**2a. Name of your Project**

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**2b. Address (or location) of where your project will take place** (your group must be based in, or project must benefit the Transforming the Trent Valley area)

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| Full postcode: or Grid Reference |

**2c. Describe your proposed project and its core activities.** (approx. 300 words)

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**2d. What is the need for your project, and what difference will your project make to the TTTV area?** (approx. 300 words)

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**2e. Who will benefit from your project and how will you make sure a wide range of people can benefit?** (approx. 75 words)

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| **2f. How many people do you aim for the project to benefit?** |  |

**Is there any particular group of people that your project is targeted at?**

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**2g. Please state the estimated timescales for your project (projects should take no longer than 12 months to complete.) You will receive the outcome of your application around 1 month after the application deadline.**

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| --- | --- |
| Project start date: |  |
|  |  |
| Project end date: |  |

Are the dates of your project flexible, what is the earliest or latest date when your project could begin?

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*Please remember that no retrospective expenditure is eligible.*

**2h. Which of the Transforming the Trent Valley Landscape Partnership Scheme objectives will your project meet?**

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| --- | --- | --- |
|  | Please tick all that are relevant | |
| 1 | Conserving, protecting and/or enhancing natural, built or cultural heritage |  |
| 2 | Helping people learn about their natural, built or cultural heritage |  |
| 3 | Helping communities celebrate the natural, built or cultural heritage |  |
| 4 | Increasing people’s awareness and enjoyment of the Transforming the Trent Valley area for residents and/ or those working in or visiting the area |  |

**2i. How will your project meet the above objective(s)? *(Include additional sheet, if necessary)***

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**2j. How are you going to promote your project? Include ways you will reference TTTV and the National Lottery Heritage Fund** (approx. 50-75 words)

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**2k. Will your project involve buildings, land or objects, do you own these outright?**

* If you do not own the land, building or item, tell us who does.
* Have you obtained permission from **all** owners?
* Please provide evidence to show permissions have been sought and granted.
* What is the overall environmental impact of this project, and how will you mitigate against any potential negative environmental impact?

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| --- | --- | --- | --- | --- |
| **If your project involves buildings or land, do you hold a lease of at least 10 years that cannot be terminated by the landlord?** | Yes |  | No |  |

**If your project involves buildings or land, please tick the statement which is applicable to you, and provide evidence from the local authority.**

|  |  |  |  |
| --- | --- | --- | --- |
| Planning permission is NOT required |  | Planning permission is required and has been granted |  |

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| --- | --- | --- | --- | --- |
| **2l. Does your project involve working with people under the age of 18 and/or vulnerable adults?** | Yes |  | No |  |

If yes, please tick to confirm the following is in place:

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| All employed staff and volunteers who work with under 18s/vulnerable adults within regulated activity have an up to date DBS (CRB) check. |  |
|  |  |
| DBS (CRB) checks are renewed every 3 years. |  |
|  |  |
| A child protection policy (if applicable) |  |
|  |  |
| A vulnerable adults policy (if applicable) |  |

**SECTION 3 – PROJECT COSTS**

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| **3a. What will be the total cost of your project?** |  |

**3b. How much are you requesting from the**

**Transforming the Trent Valley Community**

**Grants Scheme?**

* Please remember you can apply for up to 50% of total project costs to a maximum of £5000.

**3c.** **How will the remainder of the project costs be funded?**

* Have you applied to any other grant funders? If so, what is the status of these applications (eg pending, confirmed)?
* If remainder of costs will be funded from more than one source, please specify the amounts.

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Is there anything that will add non-monetary value to your project? E.g. are volunteers involved, will you receive donations of equipment?

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**3d. Please provide a breakdown of all of the project costs, identifying which aspects will be funded by the TTTV grant. (you may attach a separate budget sheet if necessary). Please see Guidance Notes for ineligible costs.**

|  |  |
| --- | --- |
| Item or activity | Cost |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
| TOTAL | £ |

**3e. Financial Information.**

Please provide the following information using your latest set of annual accounts.

|  |  |
| --- | --- |
| Total Income for the last financial year | £ |
|  |  |
| Total Expenditure for the last financial year | £ |
|  |  |
| Total cash and bank balances at the end of last year (this includes all petty cash and bank balances) | £ |

**3f. How will you monitor the success of your project?** (approx. 100 words)

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**3g. What will happen when the funding from Transforming the Trent Valley ends?**

* Will your project continue or end?
* Will it be funded from elsewhere?
* Will it leave a legacy in the Transforming the Trent Valley area?

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**SECTION 4 – DECLARATION**

Please be aware that you are making this application at your own risk and we cannot be responsible to anybody for any loss, damage or costs arising directly or indirectly from this application.

* I have read, understand and accept the notes that came with this application form. I understand and agree to you using and publishing the information in this application. I agree that you can check the information in it and any supporting documents with other people and organisations.
* The project, and my organisation’s role in it, falls within my organisation’s powers and purposes.
* My organisation has the power to accept a grant, under your terms, and the power to pay back the grant if the terms are not being met.
* I understand that any misleading statements (whether deliberate or accidental) I give at any point during the application process, or any information I knowingly withhold, could mean my organisation’s application is not valid, in which case you will cancel the grant and claim back the money we have received, stop assessing and return the application, or withdraw any grant offered to my organisation.
* The project detailed in this application has not started yet and will not do so until my organisation receives permission from you.
* I understand you will treat this information in line with the Data Protection Act 1998 (as amended), and have read the Data Protection statement in the guidance notes. I accept that you may make this form available to members of the public under the Freedom of Information Act 2000. You will be notified. Personal information will be processed in line with Data Protection Act 1998 (as amended).
* On behalf of my organisation, I agree that if we receive any grant from you for our project, we will keep to the standard terms of grant and any further terms and conditions set out in the Grant Offer Letter.

We take from your signature(s) on this form as confirmation that you:

* Have understood we have legal responsibilities under the Data Protection Act 1998 (as amended) and the Freedom of Information Act 2000.
* Accept that we will not be responsible for any loss or damage you suffer as a result of us meeting these legal responsibilities.

Finally, I am authorised to put forward this application on behalf of my organisation and sign this declaration.

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| --- | --- |
| **Print Name** |  |
|  |  |
| **Position within Organisation** |  |
|  |  |
| **Signature** |  |
|  |  |
| **Date** |  |

**SECTION 5 - CHECKLIST**

Please go through the following checklist to ensure that you have enclosed all the information you need to make an application. Applications will not be considered if incomplete.

🞎 A completed Transforming the Trent Valley Community Grants application that is signed and dated by an appropriate person.

🞎 A copy of your public liability insurance up to a value of £1 million and a copy of your health and safety policy.

🞎 A signed and dated copy of your constitution / governing documents.

🞎 Most recent set of accounts or records of expenditure. (If you are a new organisation then a letter from your bank giving your organisation’s name and account number).

🞎 An original bank statement which is dated 3 months ago or less. This will be returned to you. Most recent is best.

🞎 If a request for capital items or equipment, at least 2 quotes for each item. 3 quotes are required for items over £1,000. What is sent needs to show you have researched the costs and the price within your project costs demonstrates best value for money. If unsure, call us.

🞎 Any necessary written permission required from land/building owner(s) if your application concerns land or buildings.

🞎 Copy of planning permission and/or building regulations or a statement regarding the planning permission if your application concerns land or buildings.

🞎 Child protection policy (if applicable)

🞎 Vulnerable adults policy (if applicable).

🞎 Evidence of appropriate disclosure within Disclosure and Barring Service e.g. Name, disclosure number and date. Do not send the DBS checks themselves. Please note that this is a legal requirement if your organisation works with children or vulnerable adults within regulated activity. See [www.homeoffice.gov.uk](http://www.homeoffice.gov.uk) for guidance.

🞎 Any other information regarding the proposed project you feel will demonstrate what you have written in your application form (for example photos of the site, a Google Maps screenshot of the proposed area).

Please send applications via email to Nicola Lynes at [Nicola.lynes@supportstaffordshire.org.uk](mailto:Nicola.lynes@supportstaffordshire.org.uk). If you would rather send the application form by post, please contact us via email or call 07837 127 165 to arrange this.