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| P2101C1T21#yIS1 | **Grant Application Form** |

This application form is designed in Microsoft Word. The document is unprotected, allowing you to add rows to tables if necessary. Please do not alter the format or the content as this may void your application. This form is for an application for a grant of **up to £5,000**. Please read the guidance that supports the application form before your start filling it in. If you have any queries or require assistance with this form, please contact us before you submit the form. We want your application to be successful and we are happy to help you: [office@penrithtowncouncil.gov.uk](mailto:office@penrithtowncouncil.gov.uk) or call:01768 899 773

**Section 1 – Your organisation**

This helps us understand the type of organisation you are.

**Contact Information**

Please provide details for two senior contacts. This person will be legally responsible for the funding. They cannot be married to, in a civil partnership with, in a long-term relationship with, living with, or related to the main contact. Please enter below the details of the best person to contact to discuss this application.

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|  |  | PTC only | |
| **Full Name of Main Contact:** |  |  |  |
| **Position in the Organisation:** |  |  |  |
| **Email:**  We will use this email address to contact you throughout the assessment process, so please ensure that you provide a suitable address.  **Telephone:**  This is the telephone number we will use if we have any questions regarding your application. |  |  |  |
| **Address:**  We will use this address for all correspondence. |  |  |  |
| **Full Name of second contact:** |  |  |  |
| **Position in the Organisation:** |  |  |  |
| **Email:** |  |  |  |
| **Address:** |  |  |  |

**Your Organisation**

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|  | |  | PTC only | |
| **Legal name of your organisation:**  This must be as shown on your governing document. Your governing document could be called one of several things, depending on the type of organisation you are applying on behalf of. It might be called a constitution, trust deed, memorandum and articles of association, or something else entirely. | | |  |  |
| **Organisation E-mail Address:**  Please enter the general email address for your organisation. Unless necessary, this will not be the email address we will use to contact you about your application. | | |  |  |
| **Website Address if applicable:** | | |  |  |
| **Does your organisation use a different name in its day-to-day work?**  **Yes, or no?**  This is how you might be known if you are not just known by your legal name (the legal name is on your governing document:  **What is the name your organisation uses in its day-to-day work?** | | |  |  |
| **When was your organisation set up?**  This is the date your organisation took on its current legal status. It should be on your governing document. If you do not know the exact date, it can be an approximate date. | | |  |  |
| **Base of operations if different from postal address:** |  | |  |  |

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**Please indicate with a tick if you are a**

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| Penrith Community Group - Unregistered voluntary or community organisation |  |  |  |
| Not-for-profit company |  |  |  |
| Registered charity (unincorporated) |  |  |  |
| Charitable Incorporated Organisation (CIO or SCIO) |  |  |  |
| Community Interest Company (CIC) |  |  |  |
| School |  |  |  |
| **Companies House number:** |  |  |  |
| **Charity registration number:** |  |  |  |

**If you are neither a Charity nor a constituted local group, please provide details of your structure. (30 words).**

Your organisation must have charitable aims and objectives to be able to apply to us.

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**What is the postcode of where your project will take place?**

If your project will take place across various locations, please use the postcode of the building or address where most of the project will take place.

You must provide the full postcode. If you do not know the postcode, you can use the [Royal Mail Postcode Finder](https://www.royalmail.com/find-a-postcode) to try and find it.

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**Organisation Governance**

**Do you have a constitution or similar governing document?**

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| YES |  |  |  |  |
| NO |  |  |

**Give a brief description of your organisation.**

Briefly describe the range of services your organisation provides and what you do on a daily basis - **300 words.**

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**How is your organisation managed and what governance have you in place?** Describe the frequency of your meetings, how you record your meetings, who attends meetings, who decides your activities, how you promote your group, share its achievements and monitor finances **- 300 words**

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**What is the purpose or charitable objectives of your organisation?**

**Who is your work designed to support and what are their needs? (500 words)** Describe the circumstances or protected characteristics of the people you are supporting and the issues and challenges they face. **-200 words**

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**Please describe the membership of your organisation.**

This must include the number of either/and officers, trustees, directors, staff, volunteers, and the geographical area your membership is drawn from. – **200 words**

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**Section 2 Your Project**

**When will you spend the money?**

You have up to 12 months after award to spend the money.

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| **Record your date below** |  | PTC only | |
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**What would you like to do?**

Please describe your project. This should explain the objectives of the project and benefits to the Penrith community. Here are some ideas of what to tell us about your project:

* What difference your project will make?
* Who will benefit from it?
* How long you expect to run it for. This can be an estimate.
* How you will make sure people know about it
* How you plan to learn from it and use this learning to shape future projects
* Is it something new, or are you continuing something that has worked well previously? We fund both types of projects.

You can write between **50 and 300 words** for this section.

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**How did you hear about our grants scheme?**

Please tick any that apply:

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|  | **🗹** |
| Facebook |  |
| Instagram |  |
| Town Council website |  |
| Town Council Newsletter |  |
| Poster |  |
| Press article |  |
| Friend or family/word of mouth |  |
| Other |  |

**How does your project meet our funding priorities?**

**We fund projects and organisations based or delivered in Penrith which aim to:**

* Improve resources, opportunities, places, and spaces.
* Start, rejuvenate, or enhance projects that matter to local communities.
* Support people, communities and organisations that are facing increased demands and challenges.

**A good application should do at least one of these three funding priorities and benefit Penrith. It is a condition of any grant application that the group or project must bring direct benefit to the residents of Penrith. All applications must clearly demonstrate how this will be achieved.**

You can write between **50 and 350 words** for this section.

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**How does your project involve your community?**

What do we mean by community?

* People living in the same area.
* People who have similar interests or life experiences but might not live in the same area.
* Even though schools can be at the heart of a community, we will only fund schools that also benefit the wider communities.

Tell us how your community came up with the idea for your project. We want to know how many people you’ve spoken to, and how they’ll be involved in the development and delivery of the project. Here are some examples of how you could be involving your community:

* Having regular chats with community members, in person or on social media
* Local community membership of your organisation
* Regular surveys
* Running events

You can write between **50 and 200 words** for this section.

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**Section 3 Equity, Diversity, and Inclusion**

We want to hear more about the people who will benefit from your project.

**Is your project aimed at a specific group of people or is it open to everyone?** If at least 75% of the people you support share characteristics, then your project is for a specific group.

Your specific group may share one or more characteristics. For example, if 80% of the people you work with are female refugees, this means you support a specific group of people. In this example, they share two characteristics — women and refugees.

We know this can only be an estimate. We understand that this may be difficult to work out exactly, especially if this is a new project.

**Please tick or cross the statement below which applies to your project:**

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|  |  | PTC only | |
| My project is aimed at a specific group of people. | |  |  |
| My project is open to everyone. | |  |  |

**Who is your project for?**

If 75% or more of the people supported or benefitting from your project come from one specific group, tell us who they are. If you select an option, we will ask you to tell us more about that group.

**Please tick the statement below which applies to your project:**

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| Communities experiencing ethnic or racial inequity, discrimination, or inequality. | |  |  |  |
| Faith communities. | |  |  |  |
| People who emigrate | |  |  |  |
| People with disabilities or challenges | |  |  |  |
| Older people (65 and over) | |  |  |  |
| Younger people (under 25) | |  |  |  |
| Women and girls | |  |  |  |
| LGBTQ+ people | |  |  |  |
| People who are educationally or economically disadvantaged | |  |  |  |
| Specific groups that are not included already | |  |  |  |

**Which specific group (that you have not included already) is your project for?** Examples include care experienced young people, carers, people recovering from alcohol addiction, sex workers, people whose first language is not English people who have problems reading, men and boys. What additional information would you like to include about the people your project supports? Tell us more about who they are. **300 words**

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**Section 4 Community Benefit**

**What changes do you expect to see because of this funding?**

What changes or benefits will there be to the lives of people you help as a result of your services? Why do you believe your work makes a difference? -**300 words**

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**If the Council were unable to fund your project, what would the impact be?** **-300 words** for example, would your service not be able to reach all your beneficiaries?

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**Section 5 Grant Request**

List the costs you would like us to fund:

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|  |  | | PTC only | |
| **Total project cost:** **This is the cost of everything related to your project, even things you are not asking us to fund.** | | **£** |  |  |
| **Confirmed contributions from other sources:** | | **£** |  |  |
| **Unconfirmed contributions from other sources:** | | **£** |  |  |
| **Grant amount requested from Penrith Town Council:** | | **£** |  |  |
| **What is your accounting year end date?**  For example, 31/03 | |  |  |  |
| **What is your total income for the year?**  Use whole numbers only | |  |  |  |

**Provide information or evidence of match funding:**

For grants of more than £1,000 you need to demonstrate that you have sought match funding which means that you have applied to other organisations for grants. You need to tell us that this is in the process of being sought or is already committed. Where these requirements are not met, a clear reason should be given in writing with the application.

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| **Have you applied to other grant providers to assist with your project?**  List the organisations you have applied to and for how much and if you have been successful or waiting to hear | | PTC only | |
| **Name of grant awarding body:** |  |  |  |
| **Amount:** | £ |  |  |
| **Successful and now much was awarded:** |  |  |  |
| **Yet to hear back:** |  |  |  |
|  | | | |
| **Name:** |  |  |  |
| **Amount:** | £ |  |  |
| **Successful and now much was awarded:** |  |  |  |
| **Yet to hear back:** |  |  |  |
| **Where these requirements are not met, a clear reason should be given in writing with the application: 250 words** | |  |  |
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**List the costs you would like us to fund.**

You should use budget headings, rather than a detailed list of items. For example, if you are applying for pens, pencils, paper, and envelopes, using 'office supplies' is fine. Please enter whole numbers only without VAT and with VAT Please be as detailed as possible. The sum of the items should match the amount requested from the Town Council. Please note you can only have a **maximum of 10 rows.**

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|  | | | | |  |  |
| **ITEM** | **SUPPLIER** | | **BEFORE VAT** | **VAT** | **TOTAL WITH VAT** | |
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**Section 5 Bank details**

**Please provide your bank details. Before you submit your application, you will need to attach a copy of a bank statement that is less than three months old.**

**Is your bank account in the name of your organisation?**

**Please tick the statement below which applies to your project:**

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| YES |  |  |  |  |
| NO |  |  |  |  |

**Does it require at least two signatories?**

Please tick the statement below which applies:

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| YES |  |  | |  |  |
| NO |  |  | |  |  |
| **Account Name:** | |  | |  |  |
| **Sort Code:** | |  | |  |  |
| **Account Number:** | |  | |  |  |
| **Bank/Building Society Name:** | |  | |  |  |
| **Confirm you have provided a copy of your account statement that meets our criteria** | | YES | NO |  |  |

Please note that grants are paid electronically into your organisations account, and it is essential that this information is accurate and that you provide a copy of a recent bank statement or e-statement with this application.

**Section 6 Terms and Conditions**

**In order to submit your application, you will need to agree to our terms and conditions.**

* You have been authorised by the governing body of your organisation (the board or committee that runs your organisation) to submit this application and accept the Terms and Conditions on their behalf.
* All the information you have provided in your application is accurate and complete; and you will notify us of any changes.
* You understand that we will use any personal information you have provided for the purposes described under our Data Protection and Privacy notice.
* You accept that if information about this application is requested under the Freedom of Information Act, we **will release it in line with our Freedom of Information policy.**

**Full name of person completing this form:**

**Position in organisation:**

**Declaration**

When the application form has been completed, the authorised Trustee or Official of the applicant organisation must sign the declaration below.

I **(BLOCK CAPITALS)**

am an authorised representative of and to the best of my knowledge the information provided by my organisation and within this application is correct. If Penrith Town Council agrees to make a grant, this will be used exclusively for the purposes described in this application.

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|  | | PTC only | |
| **Signature:** |  |  |  |
| **Date:** |  |  |  |

All applications must be marked “**GRANT APPLICATION**” and sent to:

Penrith Town Council, Unit One, Church House, 19-24 Friargate, Penrith Cumbria, CA11 7XR

**Or by Email:** [office@penrithtowncouncil.gov.uk](mailto:office@penrithtowncouncil.gov.uk)

**Data Protection and GDPR**

The information you have provided in the application will be used only for the purposes of considering, determining and processing the application and in connection with any grant that is approved. The information will be retained for 6 years with the Town Council’s financial records. All personal data will be held securely and will not be shared with a third party. The lawful bases which the Town Council will rely on to process any personal information are your consent and that the Council has a legitimate interest in processing it and requires to do so to perform a public task.

**Checklist**

Check all the questions have been answered comprehensively.

**Provide:**

* Copy of a recent bank statements/building society or e-statement – no older than the last three month
* Full contact details for the applicant as well as any registered address for the organisation should be supplied.
* If you are not a registered charity, a copy of the constitution for the organisation if available.