

KYNAN ELDRIDGE FUND

Grant Application Form

(Please complete electronically where possible or use black ink

as we may need to photocopy this document)

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| **1. Contact details** (Double click boxes to tick electronically) | | | | |
| Title of main contact:  Mr  Mrs  Miss  Ms Other: | | | | |
| Gender:  Male  Female | | | | |
| First name(s) of main contact: | |  | | |
| Surname of main contact: | |  | | |
| Organisation/Group name as detailed in your constitution: | | | | |
| Main contacts role within the organisation/group: | | | | |
| Correspondence address: | | | Group address: (If different to correspondence address) | |
| Postcode: |  | | Postcode: |  |
| Tel: |  | | Mobile: |  |
| Email: |  | | | |

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| **2. Finance information** (Double click boxes to tick electronically) | | | | | | |
| Does your group produce a formal set of annual accounts? (please tick)  Yes  No  (If yes, please email a copy of your latest accounts) | | | | | | |
| Does your group have its own bank/building society account? (please tick)  Yes  No | | | | | | |
| If yes, how many signatures do you need to authorise a cheque on this bank account?  (Please state number) | | | | | |  |
| Bank/Building society name: | |  | | | | |
| Sort Code: |  | | Account Number: | |  | |
| Building society roll number (if this applies): | | | |  | | |
| Account name that payments should be made to: | | | | | | |

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| **3. About your group** | | |
| When was your group set up? | Month: | Year: |
| How many people are involved in your group in the following areas? (please give numbers)   |  |  |  |  | | --- | --- | --- | --- | |  | Management committee |  | Members (if appropriate) | |  |  |  |  | |  | Users of your group |  | Volunteers | |  |  |  |  | |  | Paid staff - full time |  | Paid staff – part time | |  |  |  | | |  | Other (please explain): | | | |  | |  |  |  | | | | |
| What type of group are you? (tick all that apply - Double click boxes to tick electronically)   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | Registered Charity | If yes, Charity Number: | |  | |  |  |  | | | |  | Company Limited by Guarantee | If yes, Company Number: | |  | |  |  | |  | | |  | Social Enterprise | |  | | |  |  | |  | | |  | Parish, town or community | |  | | |  |  | |  | | |  | Unregistered group with formal rules | |  | | |  |  | |  | | |  | Other (please describe): | | | | |  | |  |  | |  | | | | |
| Which geographical area does your group work in? e.g. Mansfield, Bulwell, Worksop, etc. | | |
| Who will your group benefit? (please tick - Double click boxes to tick electronically)   |  |  |  |  | | --- | --- | --- | --- | |  | Pre-school |  | Children & Young people | |  |  |  |  | |  | People with basic skills needs |  | Adults | |  |  |  |  | |  | Older people |  | Homeless people | |  |  |  |  | |  | Refugees/Asylum seekers |  | Unemployed people | |  |  |  | | |  | Other: | | | |  | |  |  |  | | | | |
| Tell us what your group does (maximum 100 words). | | |

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| **4. About your project** |
| **Project Summary**  Briefly describe the project you require funding for (in a couple of sentences) |
| **Project Details**  Provide details of your project - use the key words of who, what, when, where and why to tell us about your project/activity (maximum 200 words) |
| **Project Theme**  How do you feel your project meets the criteria of this fund and how exactly will people benefit? |

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| **5. Cost of project** | | | | | | | | | |
| Please give a detailed breakdown of how the funding will be spent | | | | | | | | | |
| **Item** | | | | | | | **Amount £** | | |
|  | | | | | | | £0.00 | | |
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|  | | | | | | | £0.00 | | |
| **Total amount requested** | | | | | | | £ 0.00 | | |
| What is the total cost of your project/activity? | | | | | | | £0.00 | | |
| Amount required from this source of funding? | | | | | | | £0.00 | | |
| If the two amounts differ please fill in the table below to explain where the remaining funding will come from. Will the project be viable without other funding – please specify: | | | | | | | | | |
| Funding Source | How much (£) | | Successful (£) | | Unsuccessful (£) | | | Pending (£) | |
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| When will the project / activity | | Start? | |  | | Finish? | | |  |

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| **6. Monitoring information** | |
| How many people do you expect to benefit directly from this project/activity? |  |
| What ages are the people who you hope will benefit from your project/activity?  (please tick - Double click boxes to tick electronically)   |  |  |  |  | | --- | --- | --- | --- | |  | Children under 4 |  | Children under 14 | |  |  |  |  | |  | Young people 14-19 |  | Adults | |  |  |  |  | |  | Elderly |  | All age groups | |  |  |  | | | |

**Declaration**

We are authorised to submit this application on behalf of the group and certify that the information enclosed is correct. By signing this application form, we agree to abide by the terms and conditions stated below and any additional special conditions detailed on any offer of a grant letter sent by Nottinghamshire Community Foundation.

**Terms, Conditions & Reporting Requirements for a Grant Approved by**

**Nottinghamshire Community Foundation**

We understand and agree that:

1. The grant will be used only for the exact purpose specified in the approved application as summarised above, and no other purpose. The offer letter, which confirms the award, will also explain if Nottinghamshire Community Foundation (NCF) wants us to alter any part of this application.
2. No major change can be made to the project without the express written approval of NCF.
3. We will not sell or otherwise dispose of any equipment or other assets purchased with the grant without the express written approval of NCF. If we sell any equipment or assets we may have to repay a part of any money so received. The amount which we repay will be in direct proportion to the share of the project costs which came from NCF. The decision taken by NCF on the amount to be repaid will be final; except in the case of a clear error.
4. No purchase or order of any goods or services specified by this approved application will be made before we receive the offer letter confirming the grant.
5. If a pilot project is funded by this grant we understand that NCF will not automatically fund any later project.
6. We will not change the sections of our Constitution which relate to purposes, paying members of the governing body, distribution of assets, or admitting members without first receiving the express written permission of NCF.
7. We will inform NCF of any changes to our bank or building society accounts.
8. We will comply with any relevant legislation affecting the operations of the project.
9. We will acknowledge NCF and the funder in our Annual Report. Our Chair or Secretary’s report at the AGM, the accounts covering the grant period, and in any publicity material we produce about the project. We will supply copies of all these documents if requested.
10. We agree that NCF and the funder can use our name and the name of our project in its own publicity materials, and we will inform them of any situation where confidentiality is a particular issue.
11. We will spend the grant within one year of the date of the offer letter.
12. If we do not spend the entire grant, we will promptly return any unspent balance to NCF.
13. We will monitor the project, and complete and return all required Monitoring Reports to the schedules provided.
14. We understand that NCF will not increase the amount of the grant if we overspend.
15. We will keep all financial records and accounts, including receipts for items bought with the grant, for at least two years from receipt of the grant. Receipts for items of expenditure over £200 should be retained and copies submitted with monitoring forms. These records will be made available to NCF on request. We understand that this does not release us from our legal responsibility to keep records for a longer period.
16. NCF may withhold the grant, or ask us to repay the grant, in whole or part, in the following circumstances;
    * If we fail to keep this contract in any way
    * If the application form was completed dishonestly or the supporting documentation gave false or misleading information
    * If we do not follow equal opportunities practice in employing people, recruiting new members and providing our services
    * If we do not implement and follow our Child Protection Policy/Vulnerable Adult Policy (if appropriate) in all aspects of our activities
    * If any member of our governing body, staff or volunteers acts dishonestly or negligently in their work on behalf of the group at any time during the project
    * If we fail to complete the project within one year
    * If we close down, become insolvent, go into administration, receivership or liquidation (sequestration), or make arrangement with our creditors.
17. If our group closes down we will not sell or otherwise dispose of any equipment and assets without first receiving the specific written agreement of NCF.
18. These terms and conditions will apply until we have spent the entire grant and NCF has received and approved our Monitoring Report. If we bought any equipment or assets with the grant, these terms and conditions will apply until the end of the working life of the assets.
19. NCF reserves the right to impose further terms and conditions on the grant in the following circumstances;
    * If we are in breach of the Grant Agreement
    * If any part of the other sources of funding for the project referred to in our application to NCF is withdrawn
    * If NCF becomes aware of any actions on the part of the members of the governing body, volunteers or staff of our organisation or any person or organisation substantially involved in the delivery of the Project which may have a detrimental effect on the Project
    * If in the reasonable opinion of NCF such conditions are necessary or desirable to ensure delivery of the Project in the manner anticipated in our grant application; or following an agreed change to the Project.
20. We may not assign, change, sub contract or novate this Grant Agreement or the Project without the prior written consent of NCF.
21. This Grant Agreement shall as regards this Project supersede all prior understandings between you and us and shall constitute the whole agreement between us and shall not be modified or varied without the prior written consent of NCF.
22. These conditions shall be governed by and construed in accordance with the law of England and the parties hereby choose and submit to the exclusive jurisdiction of the English courts.
23. No provision of this Grant Agreement is intended to or create any right or benefit enforceable against the parties to this Grant Agreement under the contracts (Rights of Third Parties Act 1999).

We give permission for Nottinghamshire Community Foundation to record the information given in this form electronically and understand that personal information will be treated confidentially. All information will be held in line with the Data Protection Act 1998 and other relevant legislation. The only purposes the information will be used for is deciding whether or not a grant can be awarded to your group, for customer care, for publicity and for monitoring. The information will be used anonymously for monitoring purposes and will not affect the outcome of your application. By providing us with accurate information you are enabling us to improve the support we can give to voluntary and community groups across the county.

I agree that my organisation will help with and be involved in publicity about the grant if we are successful.

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| **Signatory 1. Manager, Trustee or Director** | | | | | |
| Signed: |  | | | Date: |  |
| Name (Please print): | |  | | | |
| Position in organisation: | |  | | | |
|  | | |  | | |
| **Signatory 2. Trustee or Director** | | | | | |
| Signed: |  | | | Date: |  |
| Name (Please print): | |  | | | |
| Position in organisation: | |  | | | |

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| **Checklist – please email the following documents with your application** | **🗸** |
| Governing document containing a dissolution clause (if not available on charity commission) |  |
| Child Protection and/or Vulnerable Adults Policy (if applicable) |  |
| Latest annual accounts or anticipated budget proposals for new groups (if not available on charity commission) |  |
| Photocopy of latest bank statement or building society passbook |  |
| Quotes for items and services you are buying |  |

**Please return this form:** (preferably by email)

Email: [enquiries@nottscf.org.uk](mailto:enquiries@nottscf.org.uk)

Post: Nottinghamshire Community Foundation

Pine House B

Ransom Wood Business Park

Southwell Road West

Mansfield

Nottinghamshire

NG21 0HJ

For more information please contact us on 01623 620202 or email [enquiries@nottscf.org.uk](mailto:enquiries@nottscf.org.uk).