

Alderholt Community Fund Application Form

For office use: Ref.Number

Section 1: Your organisation or project

Name of your project:	
Address:	
Postcode:	

Primary contact details

Name:	
Position in project:	
Telephone:	
Mobile:	
Email:	

Please note all correspondence will be carried out via email

Are you a registered charity? Yes/No
(Please provide evidence of this attached to this application e.g. Registration number)

Section 2: Your organisation

What are the main activities of your organisation? *(Include a bit of history too e.g. When did you organisation start?)*

Do you have a constitution or governance document? Yes/No

Do you have a current Health and Safety Policy?	Yes/No
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Do you have appropriate insurance?	Yes/No
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If you work with children, are your staff DBS checked?	Yes/No
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If you work with children, are your volunteers DBS checked?	Yes/No
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Section 3: Your project and the need

Please write a **brief** description of your project for which you are seeking funding and how you identified the **need**. *Maximum 250 words.*

If time-limited, please indicate a start and end date for your project
(DDMMYY) Start: _____ End: _____
How many volunteers are involved with your project?

Who will deliver the project? (consider how the project will be managed, how will local people and/or businesses be involved in making it happen) *Maximum 150 words.*
(20 points out of 100 will be allocated to this section)

Who will benefit? (consider what geographical area and sections of the community might benefit) *Maximum 100 words.*

(10 points out of 100 will be allocated to this section)

What needs will the project address? (consider why the project is needed, how the project will help and what evidence you have to support this) *Maximum 250 words.*

(30 points out of 100 will be allocated to this section)

Will your project benefit the environment in any way? Explain why. *Maximum 100 words.*

(10 points out of 100 will be allocated to this section)

What do you aim to have achieved by the end of your project for which you are seeking funding? Tell us how you will know if your project has been successful? *Maximum 150 words*

(10 points out of 100 will be allocated to this section)

Section 4: Funding

What is the total cost of your project including VAT?

Is your project VAT registered? Yes/No

How much money are you seeking from the fund? £
Is this for new work or to continue funding existing work? New/ Existing

Funds are limited, if required are you able to proceed on a lower grant? Yes/No

If able to proceed on a lower grant award, please specific how the shortfall will be raised?

Please provide a summary of the main cost elements:

Have you raised any other funds yourself? Please detail how much and when:

(20 points out of 100 will be allocated to this section)

Is this the first time you have applied to this community fund and do you anticipate applying for the same project in future years?

If your application is successful, payment will be made via cheque or BACS.

Bank/Building Society Name:

Account Name/Cheque Payee:

Sort Code:

Account Number:

Have you received grant funding in the past 3 years, either from us or another funding organisation? Yes/No

If yes, please provide details (including dates, funder, amount awarded and purpose).

CHECKLIST

This application will ONLY be considered if you enclose the following:

- A photocopy of signed up to date constitution/set of rules, if applicable.
- A copy of your most recent accounts, if available.
- An up-to-date bank statement.
- Two original suitably written and signed references. The referees must be independent of your organisation but know its work well and know about the project for which you are requesting funds. Please do not provide a reference from a relative or friend, partner or another member of your group. The reference must include details on the following:
 - How the referee knows your organization
 - Background information on the organization
 - An outline of the proposed project funding that is being requested
 - The beneficiaries & volunteers involved

Next Step

Please take a copy of this completed form for your own records. We may ask you to refer to your application form during the application process and you will need to refer to it when filling out and end of grant report at the end of your project.

Please return this original form with all the items listed on the CHECKLIST via email to

alderholtcommunityfund@gmail.com

If you have any queries regarding your application, please contact us at the above address.

Declaration

Our signatures confirm our acceptance of the conditions below:

- A. We agree to abide by the terms and conditions of the grant as they are set out in the application form and the accompanying guidance. If any factors change, we will inform the fund and understand that all or part of the grant will have to be repaid.
- B. We certify that the information contained in this application is correct and that we are authorised by the organization to accept these conditions on their behalf.
- C. If successful we will not use any of the grant for any other purposes, other than those specified, without first receiving authorization from the Alderholt Community Fund. We will not use the grant for goods or services already ordered or purchased.
- D. We understand that the grant may not include everything requested in the application.
- E. We will not dispose of any capital items purchased with the grant without the permission of the Fund.
- F. We agree to participate in monitoring, auditing and evaluation relating to this fund as detailed in the guidance.
- G. We will keep the receipts for any payments made with this grant and will send copies of the receipts along with an End of Grant Report to the Community Fund at the end of the project, or within a year, whichever is sooner.
- H. We agree to the terms that no further applications will be considered until the end of the grant report along with suitable receipts have been received and approved by the ACF.
- I. We agree to publicise the Alderholt Community Fund by including their logo in any promotional publicity we produce such as newsletters and press releases.
- J. We agree to submit photographs of the project that the ACF can use to report back to donor and use for publicity.
- K. We understand that the grant amount will be listed on the ACF website together with information about our project.

We are authorised to submit this application on behalf of the organisation and certify that the information enclosed is correct. We understand that we will need to abide by terms and conditions set out by Bluefield Solar Income Fund and provide additional information if required. We understand that we will be required to monitor expenditure and to provide Bluefield Solar Income Fund and the Alderholt Community Fund with reports on the progress of the project as required. We give permission for the fund to record the information in this form electronically. We also give permission for the fund's involvement in our project to be publicised.

Signature 1:

Name:

Date:

Signature 2:

Name:

Date:

Any personal data on this feedback form will be handled in accordance with the Data Protection Act 1998 for Bluefield Solar Income Fund. We may contact you using the information you have provided.

Please tick the box if you do not wish to be contacted by or on behalf of Bluefield Solar Income Fund

Section 5: Submitting your application form

Please return your form with the listed attachments via email to Alderholt Community Fund at

alderholtcommunityfund@gmail.com