|  |  |
| --- | --- |
| **OFFICE USE ONLY** | **NOTES** |
| Unique Registration Number |  |  |
| Amount Requested |  |
| Amount Awarded |  |

**Please read the Grant Guidance Notes before you complete this form – not all organisations are eligible.**

**Please also submit:-**

1. **Your organisation’s governing document; constitution or articles of association.**
2. **The latest audited accounts**
3. **Any relevant quotes if purchasing items or equipment**

|  |
| --- |
| **A: TELL US ABOUT YOUR ORGANISATION** |
| 1. **Name of your organisation**
 |  |
| 1. **Name of main contact**
 |  |
| 1. **Position held:**
 |  |

|  |  |
| --- | --- |
| 1. **Postal address of contact person:**
 |  |
| 1. **Mobile number**
 |  |
| 1. **Email Address**
 |  |
| 1. **Landline**
 |  |

**Are you a: registered charity** [ ]  **Unregistered charity** [ ]  **Club** [ ]

|  |  |
| --- | --- |
| 1. **What are the main activities of your group?**
 |  |
| 1. **Where do you operate from?**
 |  |
| 1. **What year was your organisation / group set up?**
 |  |

|  |
| --- |
| 1. **How many people are involved in running your group? Please put numbers in boxes below:**
 |
| **Volunteer Committee Members** **5** | **Full Time Paid Staff** |  |
| **Part Time Paid Staff** |  | **Volunteers** |  |

|  |
| --- |
| 1. **Management Committee Details:**
 |
| **Name:****Position held: Chair.** | **Home address:** |
| **Name:****Position held: Secretary**. | **Home address:** |
| **Name:****Position held: Treasurer** | **Home address:** |
| 1. **Organisation Bank Details:**
 |
| **Bank Name:** |  |
| **Sort Code:** |  |
| **Account Number:** |  |
| **Account Name:** |  |

|  |
| --- |
| **B: TELL US WHAT YOU WILL SPEND THE FUNDING ON AND HOW IT WILL BENFIT YOUR LOCAL COMMUNITY** |
| 1. **Please give details of what you want to spend this funding on**
 |  |
| 1. **Who will benefit from this activity?**
 |  |
| 1. **How many North Hertfordshire residents will benefit:**

***If possible please state which part or parts of the district they live in.*** |  |

1. **Is your event/activity available to non-members? Yes:** [ ]  **No:** [ ]
2. **Does your project involve work with vulnerable groups such as children, young people, those with disabilities or frail elderly? Yes:** [ ]  **No:** [ ]

*If so, please include copies of your group’s safeguarding policies / procedures (See Appendix 1 below)*

1. **Which of the Council’s priorities does your application contribute to? For more details please refer to the accompanying interactive guide.**
2. **Attractive & Thriving** [ ]
3. **Prosper & Protect** [ ]
4. **Responsive and Efficient** [ ]

|  |
| --- |
|  |
| 1. **Please tell us how your project / event / activity supports the Council’s priorities**
 |  |
| 1. **When and where will the event / activity take place?**
 |  |
| 1. **How will you let the local community know about your event?**
 |  |

|  |
| --- |
| **WHAT WILL BE THE TOTAL COST OF YOUR PROJECT / ACTIVITY / EVENT ?****Please give a detailed breakdown of your expected expenditure.** |
| 1. **Expenditure**
 | **£** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total (A)** |  |

|  |
| --- |
| **TELL US WHAT FUNDS YOU ARE EXPECTING TO RECEIVE FROM ELSEWHERE****What other fund raising will you be undertaking?****Will you charge a fee? If so, what income do you expect to raise?** |
| 1. **Income generated by your organisation**
 | **£** |
|  |  |
|  |  |
|  |  |
| **Total (B)** |  |
| **Please give details of other funding applied for: has this been agreed or is a decision pending?** |
| 1. **Other Funding**
 | **Funding Agreed £** | **Funding Pending £** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total (C)** |  |  |
| **WHAT IS THE TOTAL GRANT AID YOU ARE REQUESTING?** | **Total:****( add B + C then subtract from A)** | **£** |

**Declaration**

**Conditions of Grant**

**•** The Council will not give grants for events/ purchases which have already taken place, or where work on a project has already begun.

• Grant monies awarded may only be spent on activities described in the application.

• The Council will require details of how the grant was spent, and the provision of receipts, within one month of the completion of the project.

• Any unspent funds must be returned to the Council.

• Details supplied later proved to be incorrect may prejudice a subsequent application.

**I declare on behalf of the organisation that:**

**•** The application is supported by the Organisation's Management Committee.

• To the best of my knowledge and belief the information I have given is correct.

• I understand the conditions on which grant funding is awarded and agree to adhere to those conditions.

• I understand that it will normally take up to 8 weeks for a decision to be reached.

• I authorise the Council to make any necessary enquiries to verify the information on this form, and to cross check information I have given with any other sections within the Council or other organisations.

• I understand that additional conditions may be attached to the award of any grant

• I am content for my contact details to be passed on to NHDC Press Office and to be published on the NHDC website YES[ ]  NO[ ]

|  |  |
| --- | --- |
| **Signed:** |  |
| **Print Name:** |  |
| **Office Held:** |  |
| **Date:** | Click here to enter a date. |

**Important**

Your application can only be processed if all the questions are answered, the form is signed and if we receive all necessary enclosures. Please use the checklist below to ensure that you are sending us everything that is required to process your application.

Please note if all these questions are not answered your application will be returned to you for completion and this will delay the consideration of your application.

|  |  |
| --- | --- |
| **All questions are answered completely:** | [ ]  |
| **The form has been signed by the Chair, Vice Chair, Treasurer or Secretary of your Management Committee:** | [ ]  |

**Have you enclosed? :**

|  |  |
| --- | --- |
| **A copy of your constitution dated and signed as adopted by your group** | [ ]  |
| **A copy of your most recent annual accounts, dated and signed as approved OR, if this is a new group, a statement of your estimated income and expenditure for the year.**  | [ ]  |
| **A copy of the quotation you have accepted: (3 quotes if the total cost of your project is over £5,000 net, and brief written evidence to show how this quotation gives best value for money.** | [ ]  |

If you have ticked all these questions, your application is now complete; please email it as an attachment to:

Community@north-herts.gov.uk

Or to which ever Community Development Officer you have been liaising with.