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**WARWICK DISTRICT COUNCIL**

**VOLUNTARY AND COMMUNITY SECTOR GRANT FUND**

**APPLICATION FORM**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Please identify the Delivery Programme that you are applying for (a separate application form is required for each programme you are applying for):** | | | | | | |
| Programme 1  Third Sector Support | Programme 2  Financial Inclusion | Programme 3  Employment Clubs | Programme 4  Brunswick | Programme 4  Lillington | Programme 4  Sydenham | Programme 4  Warwick West |
| Please have prepared the following information for your application:   * Organisation registration numbers * Organisational structure * VAT number * Insurance details and schedule document * Trustees, referees, and consortia partner details where applicable   N.B Up to three supporting documents can be uploaded to your online application on the final page before submitting | | | | | | |
| Name of applying group | |  | | | | |
| Reference (to be completed by Council staff) | |  | | | | |
| **SECTION 1 – Organisation details** | |  | | | | |
| Name of contact person | |  | | | | |
| Address | |  | | | | |
| Email address | |  | | | | |
| Phone number | |  | | | | |
| Type of organisation, for example: Community Group, Registered Charity, Voluntary Group or Community Interest Company | |  | | | | |
| Please provide the organisations registration number: | | Charity registration number:  Register of Friendly Societies registration number:  Company registration number:  Other registration number (please state):  Or state if none held: | | | | |
| Is there a formal organisational structure? | | YES (please provide a structure chart with your application) / NO | | | | |
| Is the organisation registered for VAT? | | YES - **VAT Number**: / NO | | | | |
| Will the organisation be able to reclaim VAT in connection to this project? | | YES / NO | | | | |
| Is this a not-for-profit organisation within Warwick District run for and by local people which makes use of volunteer labour? | | YES / NO | | | | |
| Is the organisation able to provide 3 years independently audited annual accounts? | | YES / NO | | | | |
| Details of your organisation insurance cover | | Type of insurance held:  Insurance company:  Policy number:  Amount insured:  **NOTE: Please provide a copy of the insurance schedule with your application** | | | | |
| **SECTION 2 – Services that your organisation provides:** | | | | | | |
| Please provide a short summary of the service your organisation provides | |  | | | | |
| **SECTION 3 - The detail of your proposal to deliver the programme you are applying for:** | | | | | | |
| 1. Please provide a detailed description of your proposal for delivery of the programme you are applying for.   Describe how your project/service will achieve positive outcomes for the delivery programme you are applying to  Where and how will your service run? | |  | | | | |
| 1. Describe how your proposal will contribute to the ‘priority areas for action’ detailed in the Grant Framework (appendix 1) | |  | | | | |
| 1. Describe the target group that will benefit:  * How many people will benefit? * Who do you aim to benefit? * How will you let people know about your activity? | |  | | | | |
| 1. Describe how you will ensure that your project is accessible to **all**? | |  | | | | |
| 1. Describe how volunteers will be involved, managed and supported in your project/service | |  | | | | |
| 1. How do you know there is a need for the work covered by your bid?  * Describe the evidence you have gathered and the source (e.g. survey, petition, statistical data, press cuttings, etc.) * What local needs have identified has the service you have described in section 3a this grant address? | |  | | | | |
| 1. Please detail any groups or partners working with you on this service and how they will contribute to the project/service | |  | | | | |
| 1. How will you publicise and market your service to reach the target groups? | |  | | | | |
| 1. Describe how you will monitor your service and demonstrate the impact it has had?   For example:   * Evidence of delivery of the work * Numbers of people benefiting * Number of volunteers and number of volunteer hours * Evaluation of the work | |  | | | | |
| **SECTION 4** – **Financial Information** | | | | | | |
|  | | **Total Fund applied for:** | | | | |
|  | | **Detailed breakdown of activity costs:** | | | | |
| **SECTION 5** **– Organisational information** | | | | | | |
| Lead contact name, position or job title, telephone number, postal and email addresses | |  | | | | |
| Trustees' name, email contact, and if applicable, details of; serious misconduct, criminal offences, close association with other trustees/ management/staff/volunteers in the organisation | |  | | | | |
| Referees' name and email addresses | |  | | | | |
| Consortia partner names, postal and email addresses (if applicable) | |  | | | | |