



Main Grants Programme 2015 - 2018 Funding Application

Section A

Contact Details

1.	Name of your organisation		
2.	Address and ward where your organisation is based and where activities are carried out. Please list wards your activities cover. If all Lewisham, please put borough-wide		
Address:		Ward based:	
Ward(s) served:			
3.	Name of KEY contact person(s)		
4.	Daytime Tel:		Mobile Tel:
	Website:		Email address:
5.	Address where official correspondence should be sent if different from address above		

Section B

Eligibility

6.	What is the legal status of your organisation? Please tick all relevant box(es)		
<input type="checkbox"/>	Registered charity (quote charity number)		
<input type="checkbox"/>	Company Limited by Guarantee (quote company number)		
<input type="checkbox"/>	Community Interest Company		
<input type="checkbox"/>	Unregistered community organisation		
<input type="checkbox"/>	Other (please specify and quote relevant number)		

7.	Does your intended programme benefit mainly Lewisham residents (85%+ of your recipients live in Lewisham)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.	Does your organisation currently receive main grant funding from Lewisham Council.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8a.	If you answered yes, and your circumstances have changed recently (e.g. you have made changes to your constitution) please state these here.		

If you have answered no to question 8 above please complete Section F below.

Section C	Partner profile
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Main grants recipients will be expected to work with the council as active partners; and applications will be assessed on what they can bring to such a partnership. Please refer to the guidance for further information on what areas you need to address in each of the following questions.

9.	Local intelligence: your understanding of local need

10.	Transformation: Your ability to transform the way you work to better meet needs.

11.	Collaboration: your track record of working in partnership

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12.	Resources: your track record of attracting resources both financial and human.
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12b.	What is your reserve policy and current reserves status? Please explain how your organisation is financially viable.
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13.	Shared values: demonstrating your commitment to these (London Living Wage, equalities, and sustainability) and plans to improve on this.
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Section D**Your proposed programme**

We ask you to indicate a theme strand below that is the primary theme you are applying to. You may choose to apply to additional themes and will need to complete Section D for each theme you apply to.

14. Please mark (with an 1) which main grant theme you are applying for as your primary theme. Please mark with 2, 3 etc each additional theme you wish to apply to. You will need to complete Section D separately for each theme you are applying to.

1 Strong and cohesive communities1a Borough wide1b Neighbourhood**2 Communities that care**2a Connecting and supporting2b Transport2c Advocacy2d Provision for vulnerable adults2e Support for families with disabled children and young carers**3 Access to advice**3a Generalist social welfare advice services3b Client specific advice services3c Specialist advice services**4 Widening access to arts and sports**4a Widening access to arts4b Widening access to sports

15. Please outline (in detail) the programme of activity that you propose to deliver, ensuring it meets the criteria of the theme(s) you have indicated above. Please refer to the guidance to ensure you answer all the relevant requirements for each individual theme.

16.	How many people do you expect to benefit from your activities in 2015/16?	Existing users	<input type="text"/>	New users	<input type="text"/>
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17.	Outline the key risks associated with the programme you are proposing and how you will minimise their impact.

18.	User profile. The Council must adhere to the Equality Act 2010 in its provision of funding. Any organisation that is grant funded by the Council must strive to ensure their services are accessible and available to everyone. The impact that the grants programme has will be assessed across all the protected characteristics in the Equality Act 2010. In order to enable us to make this assessment please tell us more about who your proposed programme will benefit:
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PROTECTED CHARACTERISTIC	PLEASE TICK ✓	FURTHER DETAIL
Age		
Disability		
Gender		
Gender reassignment		
Marriage & civil partnership		
Pregnancy & maternity		
Race		
Religion & belief		
Sexual orientation		

18b.	If your proposed programme will be aimed exclusively at one specific community please explain the reasons for this.

19.	Key milestones in delivery of programme in Year 1 from July 15 to March 16.

20.	Detail your outputs and outcomes and explain how you propose to measure your performance against outcomes. Please remember your outcomes must be linked to the theme priorities. Outcomes are the impact or change you hope to achieve as a result of the project. Outputs are the specific steps you will take to achieve the outcomes.		
	Outcomes	Outputs	
<p><i>e.g. Children and young people increase their fitness levels to improve their health and well-being.</i></p>	<p><i>e.g. An after school programme of weekly dance classes for 100 children and young people aged 8 – 16 will be delivered. 250 sessions (each 60 minutes long) will take place in 2 locations (Sydenham and New Cross).</i></p>	<p><i>e.g.</i></p> <ul style="list-style-type: none"> • <i>Registers of all attendance at activities</i> • <i>Questionnaires / interviews will be used to assess impact on participants.</i> • <i>An external health professional will also evaluate health, fitness and well-being impact.</i> • <i>Comments and observations from teaching and support staff, artists, facilitators, school teachers and parents</i> 	

Section E**Budget**

21. One year funding profile: Please provide details of the estimated income and expenditure for the organisation for 2015/16. Please add additional lines as needed.

21a.	Income	Forecast April 2015 – March 2016
	Main Grant Programme	
	Current main grant award if applicable April to June 2015	
	Amount requested under your primary theme for July 15 to March 16	
	Amount requested under your secondary theme if applicable	
	Amount requested under your third theme if applicable	
	Other Lewisham Council Grants (please specify):	
	Other funding (please specify):	
	Earned Income (e.g. sales, fees):	
	Private income (eg donors, sponsorship):	
	Total Income (£)	

21b.	Expenditure	Forecast April 2015 – March 2016
Expenditure for the period April 2015 to June 2015. There is no need to provide a breakdown of this.		
EXPENDITURE FOR PRIMARY THEME		July 2015 – March 2016
Staff costs (please specify)		
Activity costs (please specify)		
Running costs (please specify)		
Other costs (please specify)		
SUB TOTAL OF EXPENDITURE RELATED TO PRIMARY THEME		
ADDITIONAL COSTS FOR ADDITIONAL THEMES please include a breakdown of expenditure for each additional theme you are applying for.		
ANY OTHER EXPENDITURE please include here any expenditure that is not specifically related to this application.		
Total Expenditure (£)		

21c.	Funding profile summary	Forecast April 2015 – March 2016
	Total income	
	Total expenditure	
	Surplus / deficit	

22.	If the summary above shows a surplus or deficit please explain why this is the case and what you intend to do about this.

23.	What other non-financial support does your organisation receive?			
	Item	Value	Item	Value
	<input type="checkbox"/> Rent	£ _____	<input type="checkbox"/> Rate Relief	£ _____
	<input type="checkbox"/> Repairs & Maintenance	£ _____	<input type="checkbox"/> Utilities	£ _____
	<input type="checkbox"/> Other (specify)	£ _____		

24.	Banking arrangements. Successful grant recipients will have their grant paid directly into the organisation's bank account. Please give details of the bank or building society that grant should be paid into.
Account number	
Branch sort code	
Account name	
Bank name and full address	
Organisation name and/or address (if different from Section A)	
Email address for remittance (if different from Section A)	

Section F**About your organisation**

If you answered NO to question 8 (i.e. you are not currently main grant funded by Lewisham) please complete this section. If you answered YES to question 8 please proceed to section G.

25. Please give a brief description of your organisation, including stating your organisation's aims and objectives and when the organisation was formed.

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26. Is the organisation currently compliant with filing requirements? Please state when annual details were last filed with the Charity Commission/Companies House. If returns are outstanding please state why.

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27. How many people are involved in your organisation?

Committee members	<input type="text"/>	Other members	<input type="text"/>
Paid staff	<input type="text"/>	Volunteers	<input type="text"/>

Add in equality information of management committee??? YES

28. Please give details of the members of your management committee

Full name	Position Held	Date elected	Term of office
	Chairperson		
	Secretary		
	Treasurer		

29. When was your committee last elected? / /

30. Are any staff or committee members related to each other? If yes please detail.

31. Please outline what quality assurance system your organisation has in place, level attained (if relevant) and how long this is valid for?

32. Has your organisation been funded by Lewisham Council within the last 3 years? Please tick as appropriate.

Yes No

If yes, please tick which fund(s) and specify date(s) received:

- Local Assembly Funding
- Small and Faith Fund
- Sports Small Grant
- Arts / Festival Fund
- Public Health grants
- Youth commissioning
- Supporting People grant
- Other (please specify)

33. Please describe the financial management controls within your organisation, including how many people are required to sign cheques and / or make online transactions.

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34.	Please describe the opportunities and threats (risks) face your organisation over the next three years and what plans you have in place to deal with them.

35.	Your application must be accompanied by the following documents. Please note your application may not be considered if these are not provided.	
Item	Enclosed with application (√)	
Organisation's constitution or governing document		
Audited accounts for 2013/14		
Equalities and Diversity policy and procedures		
Health & safety policy		
Volunteers' policy (if applicable)		
Child protection and vulnerable adults safeguarding policy (if applicable)		
Evidence of CRB / DBS checks and disclosures – reference number and date (if applicable)		
Public liability insurance (if applicable)		

Section G

Further information and declaration

36.	In the space below write any points you want to bring to the attention of the Council.

Declaration
<p>This application must be signed by the Chair or by a member of the management committee. Scanned copy of signature will be accepted.</p> <p>The information given in this application is correct. The organisation was neither established for profit nor is conducted for profit. We will inform the relevant officer at Lewisham Council of any changes in the organisation's circumstances that would affect this application or the use of any grant funding relating to it. We agree to abide by the requirements of the Equalities Act.</p>

Name in block capitals: _____

Signature: _____ Date: _____

Position Held in Organisation: _____

Name of organisation: _____

The information you have provided us with will be used in accordance with the Data Protection Act 1998 and other relevant legislation. We have a duty to make sure you know what we intend to do with your information and who it will be shared with or disclosed to.

The council may share the information you have provided us with amongst its own departments, this is to improve working practices and the delivery of services. We may also use it to contact you from time to time.

We may pass your information to other agencies or organisations as allowed or required by law, for example to enable them to carry out their statutory duties or where it is necessary to prevent harm to yourself or other individuals.

Please tick here if you do **not** wish to be contacted by the Council.

Please check that you have answered all questions on this form as only fully completed applications can be assessed.

Closing dates for applications: 4th February 2015. Forms returned after this deadline date may not be assessed.

Please return the form to:

By email: community.enterprise@lewisham.gov.uk

By post: Grants and Information Team, Culture and Community Development Service, Lewisham Council, 2nd Floor, Laurence House, Catford, SE6 4RU