

Application Form

Please complete all sections of the application form. If you need any help or advice to complete this form, please contact Helen Trueman on 07724 584241 or email: helen.gm2lf@outlook.com

Name of group/organisation

1. Full address of group/organisation

2. Contact details

| | |
|-----------------------|--|
| Title (Please circle) | Miss/Ms/Mrs/Mr |
| Name | <input style="width: 450px; height: 25px;" type="text"/> |
| Surname | <input style="width: 450px; height: 25px;" type="text"/> |
| Telephone | <input style="width: 450px; height: 25px;" type="text"/> |
| E-mail | <input style="width: 450px; height: 25px;" type="text"/> |

3. Please describe the main activities of your group/organisation. (Max 100 words)

4. When did your organisation start?

5. Does your organisation have a set of rules/terms of reference or constitution?

6. Are you: (Please tick all those that apply.)

| | |
|---|---|
| A voluntary or community group? (not registered as a charity) | <input style="width: 100px; height: 25px;" type="text" value="Yes / No"/> |
| A registered Charity? | <input style="width: 100px; height: 25px;" type="text" value="Yes / No"/> |
| A Community Interest | <input style="width: 100px; height: 25px;" type="text" value="Yes / No"/> |

Charity number

Company?

Other (please state)

7. Are you:

A locally managed organisation?

Yes / No

Part of a larger regional or national organisation?

Yes / No

If your organisation is a part of a larger regional or national organisation please provide details:

8. How many people are involved in your organisation?

Full-time paid staff/workers

Management Committee

Part-time paid staff/workers

Volunteers and helpers

About Your Project

9. What is the name of your project (please provide a short title that we could use for publicity purpose)

10. Please tell us about your Project Idea

11. Please give us the timescale of your project

Start

Finish

12. What is the need for your project and what evidence do you have? (Max 150 words)

13. Which area/venue(s) will you be delivering your project in?

14. Is this money for new work, or to continue funding existing work?

For new work

For existing work

15. Which GM2LF Big Local outcome(s) reflect the change or difference your project will make (please confirm by ticking)

| | | | |
|--|--------------------------|--|--------------------------|
| Strengthen and sustain new and existing activities | <input type="checkbox"/> | Help more people to reach their potential through activities and support | <input type="checkbox"/> |
| Increase the opportunities for people in the area | <input type="checkbox"/> | Increase opportunities for communities to come together to actively participate in the GM2LF Big Local | <input type="checkbox"/> |
| Please specify any other differences you feel your project will make to the community. | | | |
| | | | |

16. How will your project meet the outcome(s) you have ticked? What will success look like? (300 words maximum)

17. How will you publicise the project? (max 100 words)

18. Approximately how many people will benefit from this grant?

Who will benefit from your project? Please tick as many boxes as apply.

| | | | |
|-------------------------|--------------------------|---------------------------|--------------------------|
| Male | <input type="checkbox"/> | Female | <input type="checkbox"/> |
| People on low income | <input type="checkbox"/> | Unemployed people | <input type="checkbox"/> |
| Young people 0-24 years | <input type="checkbox"/> | Older people (65 years +) | <input type="checkbox"/> |
| People 25 - 64 years | <input type="checkbox"/> | Families | <input type="checkbox"/> |
| Refugees | <input type="checkbox"/> | People with disabilities | <input type="checkbox"/> |
| Other (Please describe) | <input type="text"/> | | |

If your project involves working with children or vulnerable adults do you have appropriate Safeguarding checks and policies in place?

Yes No

Ethnic groups:

22. If the total of your project budget is higher than the amount you are requesting from Big Local, how much has been raised so far?

Total cost of your project

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Amount requested from Big Local

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How much has been raised so far

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23. Organisation's Bank Details

Account Name:

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Bank / Building Society:

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Bank / Building Society address:

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Sort Code:

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Account No

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Declaration

This application is submitted on behalf of the organisation named in Question 1, who I am duly authorised to represent. We agree to abide by the terms and conditions of the grant as they are set out in this application form and in the accompanying guidance, and understand that any offer of a grant will be subject to our proposed work remaining within grant criteria. We agree to participate in monitoring and evaluation related to this fund.

If the application is successful, details of the award will be published by GM2LF Big Local Partnership.

Any information you provide on this form will be held by GM2LF Big Local Partnership in accordance with the Data Protection Act 1998 and General Data Protection Regulation (GDPR). The information you have provided will be used for the purpose of monitoring grants paid to voluntary organisations and community groups

Signed:

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Date:

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Print name:

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Position held in group/organisation

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What next?

- Please ensure that you have completed all the required sections of the application form.
- Sign and date the application form and return to: **Helen Trueman**, helen.gm2lf@outlook.com
Alternatively post to **Lion Farm Action Centre, The Vicarage, Shelsley Avenue, Oldbury. B69 1BG.**

We have tried to make the application form as simple as possible. However, GM2LF Big Local Partnership Board reserves the right to ask for additional information or supporting documents if necessary.

If your application is successful the grant will be issued via Sandwell Council of Voluntary Organisations (SCVO), GM2LF Big Local's Trusted Organisation.