



**CROYDON**  
PARTNERSHIP

Westfield



## CROYDON PARTNERSHIP

### Youth & Enterprise Opportunity Grant Fund 2019

#### 1. ALL ABOUT YOU

1.1. Please provide the contact details of someone we can speak to if we have any queries about your application. They should be knowledgeable about the project and available to speak to us during office hours.

Full Name of your Organisation \_\_\_\_\_

Address of Organisation \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Contact Name:

Position in Organisation:

Phone number:

Fax Number:

Mobile number:

Email:

Website:

1.2. If you are a formally established group:  Yes  No

When did your organisation start? ...../...../..... (day/month/year)

What type of organisation are you (tick all boxes that are appropriate)?

Registered Charity  Number .....

Unincorporated Club or association

Other (please specify).....

Are you part of a larger regional or national organisation

*We will fund local branches if you can demonstrate you operate independently and have a separate management committee.*

Do you have a constitution or set of rules?  Yes  No

#### 1.3. Staffing and Volunteers

**How many** of each of the following are involved in the organisation (please put numbers)

Full-time Staff / Workers		Members	
Part-time Staff / Workers		Volunteers and Helpers (all ages)	
Management Committee Members		Volunteers and Helpers (under 25 years)	

**1.4.** Please describe the overall aims and objectives of your organisation and the activities or services your organisation provides

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**2. TELL US ABOUT YOUR GRANT APPLICATION**

**2.1.** Is this project for (please tick one):

- New work       To continue existing work

**2.2.** If you are asking for funding for a specific project or activity, please provide the start & end dates. If you are requesting funding for on-going work, please leave this section blank.

Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Finish \_\_\_\_/\_\_\_\_/\_\_\_\_

**2.3.** Which part of Croydon will your project / activity benefit. If yours is a regional or national project, please provide details here.

Post Code and area where most of the people who benefit will come from (if relevant)	
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**2.4.** What would you like to do with your grant? Please describe your project / activity. Please also tell us about the people or community that will benefit from your services and what kind of issues they might be facing i.e. low income, lack of facilities etc.

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2.5. Please outline the benefits or outcomes you expect to achieve as a result of the funding.

**3. WHO WILL BENEFIT**

3.1. Approximately how many beneficiaries will there be \_\_\_\_\_

3.2 **Age Ranges of Beneficiaries.** From the **list below**, please **tick one** group that would be the primary beneficiaries of this grant

<b>Children (5 – 12 )</b>	<b>Young People (13 – 18)</b>	<b>18 -35</b>
<b>36 - 60</b>	<b>60+/Seniors</b>	

3.3 **Primary ethnic group.** From the **list below**, please **choose one** group that would be the primary beneficiaries of this grant

British	Black Caribbean & White	Indian	Caribbean	Chinese
Irish	Black African and White	Pakistani	African	Any other
Eastern European	Asian and White	Bangladeshi	Other Black	Other white
Gypsies & Travellers	Other: Dual Ethnicity	Other Asian	Chinese	
Other – please specify .....				

**4. PROJECT BUDGET**

This application is for a larger grant of up to £1,000. Please explain how you would use this money. However, if unsuccessful, your application may also be considered for a grant of up to £500, and you should explain how your budget could be adapted for use these funds if you were awarded them. Any application for more than £1,000 will not be considered.

4.1. What is the total cost of this Project? £ \_\_\_\_\_

4.2. How much has been raised so far? £ \_\_\_\_\_

4.3. How much money are you applying for: £ \_\_\_\_\_

#### 4.4. Budget breakdown summary (incl. VAT).

Please provide details of items requested and a full breakdown of costs for how you would use a £1,000 budget. This can be provided on a separate sheet if easier.

Type of Cost	Amount Requested	Details / Cost Breakdown The cost breakdown should show us what calculations you used e.g. Room hire: 10 hours at £10/hour=£100; 500 photocopies at 5p each = £25.
<b>Staff costs</b> e.g. salaries		
<b>Volunteer Costs</b> e.g. travel, lunch expenses training		
<b>Operational/Activity costs</b> e.g. venue hire, childcare, etc.		
<b>Office, overhead, premise costs</b> e.g. rent, postage, telephone/fax, heating / lighting		
<b>Capital cost</b> <b>IMPORTANT NOTE</b> Please only include costs here if they are for a single asset that costs over £250 (plus VAT if relevant), that has a life of more than one year.		
<b>Publicity cost</b> e.g. designing and printing publicity material		
<b>Other costs</b>		
<b>TOTAL</b>		

#### 4.5. Budget breakdown for smaller award.

In the event that you are not awarded a full £1,000 grant, please explain how you would change your costs to make use of a grant of up to £500.

Type of Cost	Amount Requested	Details / Cost Breakdown
<b>Staff costs</b>		

<b>Volunteer Costs</b>		
<b>Operational/Activity costs</b>		
<b>Office, overhead, premise costs</b>		
<b>Capital cost</b>		
<b>Publicity cost</b>		
<b>Other costs</b>		
<b>Total</b>		

4.6. If you are successful we will make payment by cheque or BACS. Please enter the details of your bank/building society below.

Name of Bank/building society : .....	
Number of signatories required for authorisation of cheques from your account?.....	
If a grant is awarded, who should the cheque be made payable to? .....	
.....	
Sort code .....	Account number .....

**SECTION 5: ACCOMPANYING DOCUMENTATION CHECKLIST**

Please make sure you enclose the following with your application if you have them. **Incomplete applications will not be considered.**

- Proof of income and expenditure (group’s annual accounts signed)
- Signed copy of your organisation’s set of rules / terms of reference / constitution
- Signed and completed application form
- Names and addresses of management committee members, with cheque signatories identified.

Please also tick if you have the following policies but **DO NOT** enclose them. We may ask you to send us a copy if awarded a grant.

- Child Protection Policy
- Equal Opportunities Policy

**SECTION 6: DECLARATION**

It is essential that you understand and agree to sign up to the following statements. Please note that **if you leave the organisation or can no longer fulfil your responsibilities**, or someone else takes over responsibility for the grant on behalf of the organisation, **you must inform us immediately.**

- Our signatures confirm our acceptance of the terms and conditions of the grant as they are set out in this application form and the Scheme Guidance notes.
- We certify that the information contained in this application is correct and that we are authorised by the organisation to accept these conditions on their behalf.
- We will only spend the grant for the purposes outlined in this initial application unless we have received written confirmation, from the Croydon Partnership, that we can make a variation of spend.
- We will spend grants for the purchase of equipment or a short-term project within 6 months of receipt. Any other grant will be spent within a 12-month period of receipt. The Croydon Partnership may require the return of the balance of any grant not spent after this period. Any unforeseen circumstances which delay a grant being spent will be taken into account and support given where appropriate.
- We acknowledge we cannot sell or dispose of any equipment or other assets funded or part funded by the Croydon Partnership without first receiving written permission. If any equipment or assets are sold within their working life without such undertaking, the Croydon Partnership can ask for a percentage of the original grant to be re-paid.
- We realise we must keep all financial records and accounts including receipts for items bought with the grant for at least 6 years. These must be made available to the Croydon Partnership if requested.
- We will comply with the Croydon Partnership's Monitoring and Evaluation requirements and will return appropriate information within 13 months of the grant being awarded (or 6 months if the grant is for a one-off event or item of equipment). We will also send a copy of our annual accounts or financial report for the year in which the project took place.
- We will acknowledge the grant in relevant publications that relate, directly, to this project or activity and in other documents that we produce such as our Annual Review etc. We will use the appropriate logo and credit, as provided by the Croydon Partnership.
- We confirm that, if we are going to be working with children or vulnerable adults, we will ensure we have carried out the necessary checks through the Criminal Records Bureau on our paid and volunteer staff. We will also ensure that we have the appropriate policies in place, together with systems for ensuring that these policies are at work on a daily basis.
- We confirm that we shall comply with any legal and insurance obligations that may be relevant in order to carry out the scheme, such as planning, licensing, employment, health and safety, and equal opportunities legislation and public liability and employers' liability insurance as well as specific insurance requirements. We will ensure that all necessary permits and licenses have been obtained for any event or project funded by the grant and that the event or project complies with all relevant regulations.
- We accept that the Croydon Partnership will, under no circumstances, be liable for any damage, injury or loss of any kind whatsoever to any property or persons occurring as a result of activities undertaken with this grant.
- We acknowledge that we must allow Croydon Partnership representatives to make visits and have access to relevant information, if requested.
- The Croydon Partnership is committed to equal opportunities both in the provision of services and as an employer. The project shall ensure that it promotes equality of opportunity to all sections of the community in its service delivery, its internal employment and management practices, and in its dealings with any partners or contractors.
- We give permission for the Croydon Partnership to record the information in this form electronically and to contact our organisation by phone, mail or email with regards to this application. We understand the Croydon Partnership may list our organisation as a grant

recipient, and provide details about our application, in press releases, in the press, on our website, annual review and other publications. We accept that you may share information about our organisation with other funders and organisations that might be able to help us achieve our aims.

**The Croydon Partnership may hold back an instalment of a grant, or ask for repayment in whole or in part, in the following circumstances:**

- a. if the organisation fails to keep the terms and conditions of grant aid as detailed above
- b. if the application form or accompanying documents contained false or deliberately misleading information
- c. if the organisation does not follow guidelines in their Child Protection Policy (if applicable) or Vulnerable Adult Policy (if applicable)
- d. if any member of the governing body, staff or volunteers act dishonestly or negligently in their implementation of the grant
- e. if the organisation closes down, goes into administration, receivership or liquidation

This form should be signed by two people from your management / organising committee. We suggest you keep a copy for your own records

**Organisation Chair or Secretary**

Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Committee member**

Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Date: \_\_\_\_\_

From time to time Croydon Partnership may contact you with information about its activities or pass your details on to other potential funders that might be interested in your project / activity. If you do not wish to be contacted for these purposes please tick this box

Please sign and return to:

**Croydon Partnership Community Team, Croydon Partnership Project Office, Whitgift Centre  
Management Suite, Unit 2150 Whitgift Centre, Croydon, CR0 1LP  
Email: [info@thecroydonpartnership.com](mailto:info@thecroydonpartnership.com)**