

Wealden District Council Recovery Grant Application Form 2021 (Closing Date for Applications is midnight on Sunday 24th October)

About this form Please save this form to your own computer first and then you can type directly into it and save your answers. You must have the latest version of Adobe Reader installed. Download it free from: http://get.adobe.com/uk/reader/ (Please ensure that you have opened the editable version of the document from your saved files and that you regularly save the document to avoid losing work). You must not change any of the questions or alter any part of the form except your answers. If you have printed this form to complete it, please write clearly in black ink or type. NB: You must only use the latest version of Adobe Reader to fill out this form. Do not use Preview or any other application. If you have any questions after fully reading the Guidance Notes and Application form, please contact Michelle Namurach, Partnerships and Funding Support Officer (01323) 443520 or email communitygrants@wealden.gov.uk

Please read through all the guidance notes and questions before you complete the application You can apply for between £500 and £3000, to be spent by the end of March 2022, for projects that benefit the people of the Wealden District.

What the grant can be used for:

- to enable voluntary and community organisations to continue the valued support they provide to our communities this could include core costs which were affected by the pandemic and/or loss of income
- to promote physical and mental wellbeing
- to ensure resilience of community and voluntary groups in the future
- the provision of services to accommodate ongoing covid-19 measures to encourage participants to return safely.

What the grant cannot be used for:

- Grants cannot be used for any other purpose than that specified on the application.
- We will not pay for fund-raising activities or advertising costs we can signpost you to free opportunities for advertising or promoting your services.
- Grants cannot be used for activities promoting religious or political beliefs. However, we welcome applications from faith groups for community activities that are open to the whole community, regardless of religion.
- Salary costs which are not one-off or which you have been unable to demonstrate will become sustainable at the end of our funding

If you have any questions, please contact Michelle Namurach, Partnerships and Funding Support Officer 01323 443520 or email communitygrants@wealden.gov.uk

Eligibility

To be eligible you must:

- Be a voluntary organisation, community group, registered charity, not-for-profit organisation or community interest company. (Commercial organisations, Town and Parish Councils, schools or similar statutory organisations cannot apply to this programme). Please contact us if you are uncertain whether you are eligible or not.
- Have legibly completed all relevant questions in the application form.
- Ensure the application form and supporting documentation is received by the stated deadline.

You must include with your application:

• A copy of your most recent Annual Accounts. Or if you are a new group, a statement of your estimated income and expenditure for the first year.

Please send the information electronically. If you see any difficulty with this, please contact Michelle Namurach communitygrants@wealden.gov.uk

Conditions

- Your main contact and signatory must be members of your organisation whom you reasonably expect to be available for the duration of the financial year and take responsibility for providing monitoring information. You must notify the Council of an alternative suitable contact who has agreed to take over the responsibility if either leaves your organisation for any reason.
- Groups may only make one application to the 2021 Recovery Fund you cannot also apply to the 2022-23 small grant round
- You cannot apply to us for funding for items if you have applied for, or will be seeking funding for, the same items from elsewhere before you know our decision. Please make your costs as accurate as possible and be reasonably certain you can go ahead within the timescale, as we lose allocated funds which cannot be spent.
- Grants will not be awarded to organisations that have large unrestricted balances available for them to spend if a balance is 'restricted' for a particular purpose, e.g. you are saving for a building or piece of equipment, you should clearly indicate this in your application.
- We will aim to make decisions by the end of November and release funding during December
- All monies must be spent by 31st March 2022. All applicants will be required to complete an end of grant self-monitoring evaluation form. If grant funding has been used to purchase an asset such as equipment over the value of £500 then receipts need to be submitted to evidence this spend.
- Any successful applicants/organisations who subsequently do not complete the required monitoring form will not be eligible to apply to future grant rounds.

If you have any questions, please contact Michelle Namurach, Partnerships and Funding Support Officer 01323 443520 or email communitygrants@wealden.gov.uk

Wealden District Council Recovery Grant Application Form 2021

| Name of group/organisation |
|---|
| Name of main contact for this application |
| Address for correspondence, including full postcode |
| |
| Contact Telephone Number |
| Email |
| Website |
| What type of group are you? e.g. charity, community group, CIC. |
| |
| Do you have Vulnerable Adult and/or Child Protection Policies and Procedures in place to protect safety? Yes No |
| Do you have public liability insurance? Yes No |
| Please tell us which area/s of the District will benefit: |
| |
| Please estimate the number of volunteers who will be involved with this project |
| Estimate the number of Wealden residents who will benefit – NOT including volunteers |

| Has your organisation suffered any financial hardship due to the Covid19 outbreak? If yes, please give brief details of income reduction and/or increased expenditure |
|---|
| |
| |
| Wealden District Council – Restart and Recovery Plan Tick the box(es), which best reflect how your project will help to achieve the District Council aims. |
| To enable voluntary and community organisations to continue the valued services and support they provide to our communities |
| To promote physical and mental wellbeing |
| To ensure resilience of community and voluntary groups in the future |
| The provision of services to accommodate ongoing covid-19 measures to encourage participants to return safely |
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D1 About the grant you are requesting

Please give a detailed, itemised list about the grant you are requesting:

| Item or Activity: | Cost of Item: | Amount Requested from us: |
|--|---------------|---------------------------------|
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| Total Requested NB: This MUST be between £500 - £3 | 3000 | £ |

Has your organisation received a Rate Relief grant and/or Retail, Hospitality and Leisure Grant Fund (RHLGF) grant? Yes No

If yes, please give the amount/s: Rate Relief £ RHLGF £

Have you applied to other funders or received donations since April 2021 if so, please list them:

| Name of Funder/Donor | Amount: | Decision (or donation) Date: |
|----------------------|---------|------------------------------|
| | £ | |
| | £ | |
| | £ | |
| | £ | |
| | £ | |
| | £ | |
| | £ | |
| | £ | |

First Signatory

Your signature/agreement as the main contact on this form –

NB: Your Main Contact and Contract Signatory **must** be separate members of your organisation whom you reasonably expect to be available for the duration of the financial year and take responsibility for providing monitoring information. You must notify the Council of an alternative suitable contact who has agreed to take over the responsibility if either leaves your organisation for any reason.

| I confirm that to the best of my knowledge and belief, all replies give form are true and accurate. I understand that supporting information any stage of the application process. | • • |
|--|------|
| Signed | Date |
| Please enter the email address from which the form was submitted | |

Second Signatory - Contract

(This section MUST be completed by a person duly authorised to do so on behalf of the organisation making this application. They must have read and understood the whole application. This may be for instance your Chairperson, Vice Chairperson, Secretary or Treasurer. They should **not** be the main contact for the application.)

Terms

- 1. The grant will be used for the purposes set out in this application only any changes must be agreed with the Council in advance
- 2. If we do not spend the entire grant by the end of the Covid19 crisis, we shall promptly return any unspent monies to the Council.
- 3. The Council may use our name and the name of our project in its own publicity materials and we will inform the Council of situations where confidentiality is a particular issue.
- 4. We shall keep records of the number of Wealden based beneficiaries, complete an Evaluation form at the end of the crisis, with relevant documentation to be provided as proof that the grant has been spent.
- 5. The Council shall have no liability to the Organisation for any claims, losses, damages or expenses it may suffer or incur as a result of its use of the grant.
- 6. The Council may at its sole discretion withhold or suspend payment of a grant and/or require repayment of all or part of the grant in the following circumstances:
 - a) the Organisation uses the grant for purposes other than those for which they have been awarded;
 - b) the Organisation fails to comply with any of the terms and conditions set out in this Agreement;
 - c) the Organisation provides the Council with incorrect or misleading information or completes the application form or supporting documentation dishonestly;
 - d) any member of the governing body, employee or volunteer of the Organisation has:
 - (i) acted dishonestly or negligently at any time and directly or indirectly to the detriment of the Project; or
 - (ii) taken any actions which, in the reasonable opinion of the Council, bring or are likely to bring the Council's name or reputation into disrepute

| Title | First name | Last name | |
|---------------|----------------------------|---|--|
| | | | |
| | | | |
| Occupation | | | |
| | | | |
| Position in (| Group | | |
| Contact add | dress (including postcode) | | |
| | | | |
| | | | |
| Phone Num | ber | | |
| | - | ess to confirm you have read the full applic ntract signatory must NOT be the Main Applicant): | |
| | | | |

You must save a copy of this form and keep it safe for future reference for at least 2 years

Please return this form to <u>communitygrants@wealden.gov.uk</u> by midnight on Sunday 24th October

Wealden District Council is committed to ensuring that your privacy is protected and will only use and store your personal data in line with the General Data Protection Regulation 2016 and the Data Protection Act 2018. We collect and use your personal data in order to provide services you have requested from us or to carry out our legal obligations to you. We will not disclose your personal data to any third parties, unless we need to do so to provide a service to you or we are legally required to do so. We may share your personal data with other Council departments in order to provide the service you have requested and to ensure that the information we hold about you is accurate and up to date. Our Privacy Policy sets out how we collect, use and securely hold your data If you want more information on how a particular Council service uses your personal data, please view the full policy and Privacy Notices on our website using the following link: www.wealden.gov.uk/privacypolicy

Final checklist

| Please tick off this checklist to make sure you are sending us everything we need in order to process your application | Tick Box |
|--|-------------|
| All questions are answered fully and correctly | |
| You have taken and kept a copy of this Application form for your reference | |
| This form has been signed by the two separate signatories required (the Main Contact must NOT sign it twice) | |
| Make sure you have enclosed all of the following: | |
| A copy of your most recent Annual Accounts OR If you are a new group, a copy of your estimated income and expenditure budget for the first year. | |

Additional information

| Please use this space (up to a maximum of an additional A4 sheet) for any additional information you wish to add. Please ensure you include the question number to which the information relates. (Information included in covering letters or outside of this application form will not be considered as part of the assessment process) |
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