Appendix 2 - Area Committee Funding Application

PART 1 - Overview
Short description of your project (Max 60 words)
Amount of funding requested
PART 2 - About your group
Name of Organisation/Group:
Address:
Name of person completing application:
Company of the Compan
Contact Address (if same as above leave blank):
Telephone Number:
Telephone (value).
E-mail Address:

Website Address/Social Media:						
Туре	of organisation:					
Cons	tituted Group	Charity	Community Interest Company	Not for P	rofit	Private company
1	ity Number: oplicable)					
	pany Number: oplicable)					
Date	organisation es	tablished:				
	does your orga	nisation do? Pl	ease outline the vision, va	lues and ma	in activities	
				Γ	YES	NO
2.1	document e.g.	constitution, m	nave a recognised governion emorandum etc.? In the document	ng	TES	
Does the organisation/group have a committee with at least three members?		least				

	Does the organisation have a bank accou	ınt in the			
2.3	organisation/group's name?	ant in the			
2.4	Does the organisation/group have a safe	eguarding policy in place?			
2.4	If yes, please attach when submitting the	e document			
2.5	Has your group/organisation previously funding for the same or similar project in				
2.6	Has your group/organisation considered routes (for example other organisations, companies, property owners) to fund or before applying to Area Committee fund				
		Date	Amount (£)		
•	u answered yes to question 2.5, please ide the amount and date received:				
•	u answered yes to question 2.6, please	Date	Detai	ls	
•	ide the date and other routes iidered:				

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PART 3 – Why is your project needed?

Which Area Committee are you applying to? If more than one, please indicate. Please note that the outcome of your bid is at the discretion of each Area Committee, independent of one another.

North East Area	North West Area	Central Area	South East Area	South West Area
Committee	Committee	Committee	Committee	Committee

If you are applying to more than one Area Committee, please explain why this is. What are the benefits to each area? Where will attendees come from?
What is the need for your project? Who will be helped?
Outline the information on your project below, ensuring you relate to the relevant <u>Area Committee</u> <u>Action Plan</u> (Max 500 words)
What evidence do you have of this need?
Please include results of any consultation and evidence on how it will benefit the residents of the committee area you are applying to (Max 500 words)

PART 4 – How will your project work?			
Please describe your project and how it meets the need (max 500 words)			
What risks have you identified for your project and how will you manage them? (e.g. financial,			
health and safety, operational, success etc.)			
How many beneficiaries will benefit from the project?			
Please refer to the evidence you highlighted in Section 3. (Max 500 words)			
How will potential beneficiaries be made aware of the project?			

How will your project affect people from different backgrounds? Have you considered how to make your project fair for everyone in relation to the Equality Act of 2010?					
		YES	NO		
4.1	Have you considered the use of volunteers for delivering your project and how you will promote these volunteering opportunities?				
4.2	Have you read the relevant guidance and information about volunteers in Appendix 1 of the <u>Funding Guidelines</u> ?				
plea	If you answered yes to any of the above questions, please state how you will promote your opportunities and engage with volunteers?				
Please	e describe how you will minimise the environmental impact of your p	oroject			

PART 5 – Costs & Funding

Please provide a full breakdown of project costs for each item of expenditure, and enclose quotations/links where applicable:

Description of expenditure		Cost (£)
Total project costs		
Total amount requested from the Area	North West	
Committee(s)		
If you are applying to more than one Area	South West	
Committee, please consider the amount of	Central	
money requested is proportionate to the impact of the project on the residents in each	North East	
specific area.	South East	

Please show in the table below how much funding you have already secured or are currently applying for towards the project:

Name of Funder	Amount of funding requested	Granted (yes/no)	Waiting for outcome (yes/no)

How will any remaining costs be met?			
How w	ill the project be sustained after the funding has been spent?		
PART 6	5 – Supporting Information		
Please	attach your supporting documents as appropriate to your application		
All Gra	nts		
	Recognised governing document e.g. constitution, memorandum, Charity or Community Interest Company registration etc.*		
	Proof of bank account in the name of the organisation (e.g. bank statement or letter) *		
	Results of consultation (if applicable)		
	Safeguarding policy (if applicable)		
	Quotations for project costs (if applicable)		
Mediu	m & Large Grants (£1,000 over)		
	Yearend accounts *		
	If no yearend accounts are available (for instance if you are a new group), please provide a copy of your accounts to date and a scan of your latest bank statement		

Large G	Grants (£5,000 and over)
	Business plan or similar document setting out your plan to sustain your organisation & project.*
* requi	red, as appropriate to grant size.
PART 7	– Monitoring your success
organis	ea Committee will require progress reports during the life of the project, what methods will the sation use to measure success of the project? What will be the key performance measures that I report on?
(numbe	oring is collecting and recording information about what your group is doing – outputs er of sessions held, number of attendees, demographics etc), outcomes (the effect your working on peoples' lives) and impact (the change created as a result of the project).
informa	ting is using the information collected (qualitative and quantitative), together with other ation and peoples' experiences, to get an overall picture of your group/project, its work, impact.

PART 8 – Terms & Conditions

Any misleading, incorrect statement, or fraudulent action or statement at any stage of the application process, whether deliberate or accidental, may render the application invalid and require the repayment of Area Committee Funding in full if paid or the withdrawal of the Area Committee Funding offer.

Applications found to be fraudulent will be reported to the police.

The Area Committee Funding will be used for the purpose set out in the approved report or as amended with the agreement of the Area Committee and the applicant organisation.

Any Area Committee Funding awarded will not be increased in the event of an over spend.

Applicants should note that the award must be acknowledged as Ipswich Borough Council Area Committee Fund and must comply with any reasonable requests relating to publicity.

Any organisation awarded Area Committee Funding shall be subject to monitoring, which could involve site visits and the collection of statistics.

The applicant will forward to the Communities Team, performance information within 6 months or on completion of the project. Failure to submit this information may render the applicant ineligible for further Area Committee Funding and may be asked to repay the funding in part or full.

We confirm that all staff / volunteers working with children, young people or vulnerable adults have had the relevant DBS checks completed (applicable where appropriate).

Area Committee monitoring and evaluation helps us to ensure that funding is spent in accordance with Area Committee guidelines. You will be sent a link to an online form following the completion of your project, or bi-annually until your project is complete.

Please note that your declaration confirms that you have read and accepted the terms and conditions for Ipswich Council Area Committee Funding.

We require the signatures of two people authorised to sign on behalf of your group (that are not directly related to each other).

Signatures

We, the undersigned, on behalf of the applicant organisation/group understand and agree that:

- We are authorised to complete this application on behalf of our organisation/group.
- We have the power to accept the Area Committee funding awarded to our organisation/group subject to the terms and conditions listed and the power to repay the Area Committee Funding in the event of any funding condition not being met.
- This funding application falls within the objectives of our group or organisation.
- All staff / volunteers working in a position of trust with children, young people or vulnerable adults have had the relevant DBS checks completed.

Signed by authorised signatory (1):	Signed by authorised signatory (2):
Date:	Date:
Name:	Name:
Position:	Position:

Please return your completed form to the Community Engagement team at Ipswich Borough Council:

e: communities@ipswich.gov.uk

Laura Cooledge (East),

t: 01473 433273 e: laura.cooledge@ipswich.gov.uk

Beth Robinson (Central),

t: 01473 432837 e: beth.robinson@ipswich.gov.uk

Zara Hanman (West),

t: 01473 432226 e: <u>zara.hanman@ipswich.gov.uk</u>