#  **Doncaster VCFS Fund**

*Please select which grant your application relates to:*

***General Grant (between £751 - £5000)***[ ]

*We would like to encourage partnership working so two organisations working with allocated general grants could access a maximum of £5,000 to achieve their goals. To ensure that many organisations could benefit from this opportunity only two organisations can partner together.*

***Large Grant (£5001 - £20,000 for max 4 organisation collaborative)*** [ ]

*Partnerships of larger groups and mutually beneficial collaborations will be considered where supporting a particular place or contributing significantly to making a long-lasting impact to local communities or a particular disadvantaged or excluded group in Doncaster.*

Section 1 – Organisation Details

|  |  |
| --- | --- |
| Name of your organisation: |  |
| Address of your organisation: |  |
| Website: |  |
| Email address: |  |
| What type of organisation are you? |  |
| Organisation Start Date (mm/yy): |  |
| Organisation's annual income for past financial year: |  |
| Organisation's annual expenditure: |  |
| Do you have appropriate valid insurances to carry out project activities? |  |
| Does your organisation have three month's expenditure or more in your reserves? |  |
| Please explain the main duties of your organisation and the services that you offer:  |  |

|  |  |
| --- | --- |
| Lead Contact Details |  |
| Name: |  |
| Role in the organisation: |  |
| Contact Number: |  |
| Email: |  |

Section 2 - About your grant application

|  |
| --- |
| Project Details |
| Why do you need the grant? |
|  |
| What will the grant be used for? |
|  |
| What will happen if you don’t get this grant?  |
|  |
| What geographical area does your service cover:  |
|  |
| How is your organisation linking in with the wider Covid-19 Response? Are you coordinating your work with other local groups?  |
|  |
| Which partners do you propose to work with on this project? What is their role in this bid? How are funds/benefits in kind being allocated to other partners?  |
|  |

|  |
| --- |
| Budget |
| Please enter the amount you're asking for, up to a maximum of £20,000. Note that funds are limited, so please be realistic:  |
|  |
| If successful, what do you plan to spend the grant money on? (please provide a breakdown of costs and how you reached the requested amount) |
|

|  |  |
| --- | --- |
| Description | Cost |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total** |  |

 |
| Are you applying for the total cost of the project? |
|  |
| If not, where is the other money coming from (please provide details totalling full cost) |
|  |
| What impact, if any, has Covid-19 had on your organisation's funding? |
|  |

Section 3 – Impact

|  |
| --- |
|  |
| What difference will this grant funding make to people? |
|  |
| Who will benefit from this grant/your proposed service? (e.g older adults? BAME community? People who are disabled? Etc) |
|  |
| Approximately how many people will benefit from this funding? |
|  |
| How will you evidence these outcomes/ benefits of the project? |
|  |

Section 4 - Bank details, supporting documents and declaration

|  |
| --- |
| Bank Details |
| Bank account name:  |
|  |
| Bank name:  |
|  |
| Bank sort code:  |
|  |
| Bank account number:  |
|  |

Safeguarding

If you are working with children or with adults who might be vulnerable, it is important that you think about how to keep them safe, and that you have policy and procedures in place.

By ticking this box, you confirm that your organisation has appropriate Safeguarding policy and procedures in place, and that you will ensure these are followed. You will be required to show evidence of such policies if your bid is successful. [ ]

Supporting Documents

You will need to send us:

1. A scanned copy of a bank statement no more than 3 months old, as evidence of your organisation's bank account name, sort code and account number.

2. A copy of your organisation's governing document (e.g. memorandum of association or constitution).

3. A copy of your organisation's most recent annual financial accounts.

4. Quotes for any items you plan to buy with the grant.

Please note that if we do not receive all of the requested information/documents, your

application will be delayed and may be ineligible.

Declaration: terms and conditions of grant

By ticking the box below and submitting this form, you are confirming that you agree to our Terms and Conditions of Grant, included in the declaration below. If any of these Terms and Conditions is broken, you may be required to repay any grant awarded in full. It is important that you read the declaration below carefully before you click to accept it.

* I confirm that I am authorised to complete and submit this application on behalf of the organisation named above.
* I confirm that the information given on this application form is true and accurate to the best of my knowledge.
* I confirm that the organisation named above has a governing document and a board or management committee made up of at least 3 unrelated persons.
* I confirm that the bank account details provided above are the account name, sort code and account number of a bank account belonging to the organisation named above, and that two unrelated signatories are required for all payments from this account.
* I confirm that any grant awarded in response to this application will be spent for the purposes outlined in this application.
* I confirm that the organisation will monitor the expenditure of any grant awarded in response to this application, that we will keep appropriate records of all expenditure, and that we will report to the funders at the end of the grant period.
* I confirm that the organisation will acknowledge DCLT, SYHA and DMBC as the funders on relevant publicity and documents in line with their publicity policy document.
* I confirm that any and all photography, films etc. sent to the funders have the full consent of those pictured for use in third party publicity, website, social media etc.
* I confirm that the organisation shall comply, at all times, with any relevant legislation and adopt good practice in ensuring safety measures within our project such as planning, licensing, employment, health and safety, insurance, equal opportunities legislation and DBS checks.
* I confirm that the organisation accepts liability relating to the projects it undertakes and releases the funders from any and all liability.
* If the application is successful, I confirm that I will allow DCLT Finance Department to contact me to verify and/or confirm ID and banking details prior to payment.
* If the application is successful, I confirm acknowledgement that payment may take up to 14 business days.

I confirm that if the organisation:

* Fails to comply with any term or condition listed above,
* Fails to complete the project described in this application,
* Fails to investigate and resolve any reported financial irregularity,
* Ceases to operate; changes the nature of its operations; winds up; or enters into administration or liquidation;
* Receives funding from another source for the expenditure applied for above,
* Is involved in illegal activity, or any activity likely to bring the funders into disrepute the funders may withhold, withdraw or require the organisation to repay any grant awarded in relation to this application.
* I confirm that the organisation will not apply for or obtain funding from another funder for any activities which have been paid for in full by a grant in response to this application.
* I confirm that the organisation will promptly notify and repay immediately to the funders any money incorrectly paid to the organisation, by administrative error or otherwise.
* I understand that any grant awarded by the funders will be done so on the basis of information supplied at the time of this application. If any information is subsequently found to be misleading, inaccurate or false then the grant must be paid back to the funders in full.
* I understand that any money required to be paid back to the funders which is not paid back immediately (or within any other timeframe specified by the funders) will be recoverable as a civil debt and may result in civil or criminal proceedings.
* I have attached all required additional documents.

By ticking this box, I confirm that I have read, understood, and agreed to this declaration on behalf of the organisation named above. [ ]

Please attach your governing document.

Please attach your most recent set of accounts. If you don't have accounts, please send an income and expenditure sheet for the current year.

Please attach a copy of a recent bank statement (within the last 3 months), as evidence of the account name, sort code and account number.

Please attach any scanned quotes for equipment or services relevant to your project breakdown. At least 2 comparative quotes are required so that the panel can assess value for money etc.