DOVER BIG LOCAL PARTNERSHIP

Use this application form for grant amounts from £500 - £50,000

Part 1 - About your organisation

Name of organisation	
	Voluntary or community organisation
	Registered charity
Type of organisation – tick one	Social Enterprise
lick one	Company Limited by Guarantee
	Other – please specify
Charity/Company number if applicable	
When was your organisation set up	dd/mm/yyyy
Main contact	
Position in group	
Address	
Postcode	
Email address of main contact	
Telephone number	

Part 2 - About the project

our project a short title so it can be easily identified (Max 10
lease describe your project and the activities you want us to rds)
ect take place?
Location:
,

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Multiple sites	Locations:			
Ward or other area – please specify				
_	oject take place	? Is t	nis a realistic time scale?	
Start date: End date:				
Sustainability If we award you a g exhausted?	rant what will ha	ppen	to your project when this funding is	
			e to one of the broad activity areas	
identified in the Do	over Big Local p	olan?	Please tick all that apply	
Arts and culture			Local Economy	
Environment & Gree	en Spaces		Communication	
Sport & Leisure			None	
Part 3 - Community Involvement				
How will you prom	ote your projec	:t? <i>(</i> \	flax 150 words)	
How will you involve as wide a range of people as possible? (Max 150 words)				
How will you go al	out delivering	vour	project?(Max 150 words)	

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How many people will be invo	lved in your activity?	
Where will they come from? P	lease tick and specify location	1
Local area defined by you		
Housing estate		
Parish or Ward		
Dover wide		
What will their role(s) be?(Max	(150 words)	
Part 4 - Beneficiaries		
Who are the main beneficiarie	s? Please tick all that apply	
Who are the main beneficiarie Children, parents and families	s? Please tick all that apply	
	s? Please tick all that apply	
Children, parents and families	s? Please tick all that apply	
Children, parents and families Young people	s? Please tick all that apply	
Children, parents and families Young people Older people	s? Please tick all that apply	
Children, parents and families Young people Older people Minority ethnic groups	s? Please tick all that apply	
Children, parents and families Young people Older people Minority ethnic groups Low income groups		
Children, parents and families Young people Older people Minority ethnic groups Low income groups The whole community		
Children, parents and families Young people Older people Minority ethnic groups Low income groups The whole community People with protected characteris		
Children, parents and families Young people Older people Minority ethnic groups Low income groups The whole community People with protected characteris Other (please specify) Where will they come from? P	stics (please specify)	
Children, parents and families Young people Older people Minority ethnic groups Low income groups The whole community People with protected characteris Other (please specify)	stics (please specify)	1
Children, parents and families Young people Older people Minority ethnic groups Low income groups The whole community People with protected characteris Other (please specify) Where will they come from? P Local area defined by you or	stics (please specify)	1

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Parish or Ward	
Dover wide	

Part 5 – Outcomes - the difference your project will make

Big Local has four priority outcomes. Which of these key differences will your project bring about? Please tick all that apply	
Communities will be better able to identify local needs.	
Local people will be able to prioritise and act to address the needs identified.	
3. Local people will have increased skills and confidence.	
4. People will feel that their area is an even better place to live.	
If you expect your project to deliver other more specific outcomes plealist them below	se
Please explain how your project will meet this outcome(s) (Max 150 woll	rds)

Part 6 – Evidence of Need

Why is your project needed? (Max 150 words)
What evidence do you have to support this need? (Max 150 words)

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Part 7 - Project Budget		
Total Project cost		
Capital Revenue		
		£
Breakdown by activity costs – attach a separate s	spreadsheet if yo	u prefer
Item	Total cost	Amount requested from Big Local
Total		
Matched Funding		
If the amount requested from Big Local is less where will the difference come from? For example fundraising, resources given for free (Max 150 wo	mple, gifts in kind	project cost d, other
Part 9 Pank Dataila		

Part 8 - Bank Details

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- Your account must be in the name of the organisation that is applying for a grant and will carry out the project.
- We require two unrelated people to sign each cheque or authorise a withdrawal (including debit card or internet purchases and cash withdrawals). If you are a school, a local authority bank account is acceptable.

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Does your bank account meet these requirements?		Yes	No	
Bank or Building Society Name and Address				
Organisation name on				
statements or passbook				
Is this the same as on your gover	ning document?	Yes	No	
Account number				
Sort Code				
Building Society Roll Number if				
applicable				
Address your bank or building				
society has for this account				

Part 9 - Financial Information

Please provide figures from your most recent accounts or, if you have been operating for less than fifteen months a projection based on your income/expenditure forecast from your business plan.		
Account year ending		
Total income for the year (A)	£	
Total expenditure for the year (B)	£	
Surplus or deficit at the year-end (A-B)	£	
Total savings or reserves at the year end	£	
Have your accounts been independently examined/audited?	Yes/No	

Part 10 - Policies and Insurances

Please supply a copy of any policy documents you have adopted:	Attached
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	Yes	No
Safeguarding Adults		
Safeguarding Children		
Health & Safety		
Data Protection		
Lone Worker		
Other – please specify		

Insurance

Do you have adequate insurance in place?			
Public Liability Insurance	Yes	No	N/A
Employers Liability	Yes	No	N/A
Other (please specify)			

Declaration

I declare that the information given in this application is correct to the best of my knowledge and will form the basis on which the offer of any grant will be made. I confirm that I have the authority of the group named to submit this application on their behalf.

Name	Signature	
Date	Position	

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