

Runnymede Borough Council Application Form

If you need help reading this document please contact Denise Morley on 01932 425610 who will try to provide a reading service, a large print version, or another format.

1. Name and Address of Organisation

Telephone Number _____ Email address _____

2. Name and Address of Contact for Purposes of this Application

Telephone Number _____ Email address _____

3. Date Organisation Established _____

4. Please attach the Organisation's Constitution

5. Please attach details of the Organisation's Management Committee

6. Please state the aims and role of the organisation

7. What are the objectives of the project you are seeking grant for?

8. Please demonstrate the need for the project (what research/consultation you have carried out)

9. Please tick any of the following principles and criteria that the project will meet and provide details on how the project will meet these principles and criteria.

Principles

Assist areas of the borough that have been classified as areas of relative deprivation. Please confirm if your proposed project covers:

i) Chertsey St Ann's Englefield Green Egham Hythe
Addlestone Bourneside

ii) Develops partnership working with two or more organisations to establish effective joint working and long term sustainability

iii) Is a time limited rescue package designed to pick up an essential service for a voluntary organisation that is ceasing/or has ceased to operate, to allow the services to transfer to a different charitable organisation

iv) Is a pilot project, which has the prospect of long-term funding from elsewhere

v) Will build community strengths and address unmet needs – please specify _____

Criteria

i) Will promote and assist in improving access to existing health, social care and social support facilities – please specify how this will be achieved _____

ii) Will improve the quality of life and independence for vulnerable people

– please specify how this will be achieved _____

iii) Will reduce homelessness – please specify how this will be achieved _____

iv) Will encourage and reinforce community identity and engagement – please specify how this will be achieved

v) Will promote healthy lifestyles; tackling obesity, sexual health, smoking, teenage pregnancy and alcohol misuse – please specify how this will be achieved

11. Please list any partners in the project:

12. How many people are likely to benefit from the project?

13. Please provide a breakdown of costs for your proposed project:

Purchase of equipment/materials _____

Salaries (including overheads) _____

Running costs (eg telephone/electricity etc) _____

Rent and rates _____

Other (please specify) _____

Total cost of project (including VAT) _____

14. How much grant is being sought from Runnymede Borough Council?

15. How will the future costs of the project be met, once the Runnymede Borough Council funding has ceased?

16. Estimated start date _____ Estimated completion date _____

17. Please attach a copy of audited accounts for the last complete financial year

18. Please enclose a budget statement of anticipated income and expenditure for the current and next financial year

19. If the application is for more than £1000, please include a business plan

20. Please list other funding amounts received, or likely to be received, from other organisations/bodies for the project:

Please return this form to Community Partnership Officer, Runnymede Borough Council, Station Road, Addlestone, KT15 2AH OR email to: suzanne.harrison@runnymede.gov.uk