Councillors' Community Initiative Fund



Application Form 2022-2023

Please read the accompanying Guidance Notes before completing Part One of this Application Form.

Please make sure you answer all questions; incomplete forms cannot be processed. For help please see the Guidance Notes or email democratic.services@staffsmoorlands.gov.uk

When you have completed Part One of this Application Form please return it to your District Councillor who will complete Part Two.

Once your District Councillor has completed Part Two, they will return the Application Form to Democratic Services for final approval (by the District Council's Portfolio Holder for Communities) and to be processed for payment. This can take up to 6 weeks to complete.

Payment will be made by BACS transfer.

Applications can be submitted any time between Monday 16 May 2022 and Tuesday 31 January 2023.

Please aim to return your form to your District Councillor before mid-January 2023 at the latest to make sure they have time to complete Part Two.

PART ONE: To be completed by the organisation/ group applying for the grant

ABOUT YOUR PROJECT OR ACTIVITY			
Name of the organisation/ group applying for a grant:			
Please describe the project or activity:			
How many local people (volunteers) help to organise this activity?			
How much funding is requested?			
What will the funding be spent on?			
How many people will benefit from this activity?			
How will people benefit from this activity?			
When will the activity take place?			

ABOUT YOUR GROUP OR ORGANISATION				
Contact person:				
Contact address and postcode:				
Tel:				
E-mail:				
Does the group/ organisation have a formal set of rules/ statement of purpose? If yes, please enclose a copy with the application form.	YES	NO		
Are you a registered charity? If yes, please include the	YES	NO		
charity number Are you governed by	Number:			
membership of another organisation? If yes please include the name	YES Name:-	NO		
Payment Details Payment is made by BACS transfer.	Please state who the	e payment is to be made payable to:		
Bank Account details	Sort Code: -			
	Account No: -			
If your group doesn't have a bank account in its own name, please provide the	Name: -			
name of an organisation which has agreed to	Sort Code: –			
receive the funds on your behalf.	Account No: -			
DECLARATION				
 I apply for grant aid on behalf of the organisation named above. I declare that I have read and understood the guidelines enclosed with this form. I declare that the information provided on this form is complete and true and accurate. I agree that if successful both I and the organisation I represent will abide by the conditions under which grants are made, and that a grant made by the Council will be repaid if the organisation is found to be in breach of conditions applied to the grant. 				
SignedName (print)				
Position Date				

PART TWO: to be completed by the Ward Councillor(s)

COUNCILLOR(S) SUPPORT (to be completed by the Ward Councillor(s))			
Name of group or organisation:			
Name of project or activity:			
Name(s) of Councillor(s) supporting this bid:			
Ward Name:			
How much would you like to contribute? If more than one Councillor would like to support this project please confirm the COMBINED TOTAL AMOUNT that you would like to award.			
Would you like a presentation document? (Large scale 'dummy' cheque)	YES NO		
Please declare any interests you have in this project or activity:			
How have you engaged with the organisation?			
All Councillors supporting this application need to sign.	Signature(s):		
Please date your signature.	DATE:		