**STAFFORDSHIRE MOORLANDS**

Staffordshire Moorlands Community Fund

**Application Form**

Funding is available for voluntary sector organisations that are providing support for those affected by the cost-of-living crisis within the Staffordshire Moorlands.

You can apply to the scheme if you are:

* An Unincorporated Association (a group set up with a constitution)
* A Registered Charity
* A CIC
* A CIO
* A new group (not yet constituted)

AND if you are operating in, or benefiting, people or places within the local authority district of the Staffordshire Moorlands.

The following cannot apply

* Individuals
* Private Businesses
* Statutory organisations
* Any organisation that has political activity as one of its stated purposes i.e. as defined by the Charity Commission for England and Wales: any purpose directed at furthering the interests of any political party; or securing, or opposing, any change in the law or in the policy or decisions of central government, local authorities or other public bodies, whether in this country or abroad.

If you need any assistance in completing this form, please contact Victoria Ellis email: Victoria.Ellis@staffsmoorlands.gov.uk Tel 07595 242 855

**Please check Section 4 – Checklist before submitting your application**

**SECTION 1 ABOUT YOUR ORGANISATION**

**Name and address of organisation**

|  |  |
| --- | --- |
| Organisation name(as per constitution) |  |
|  |
| Official or registered address |  |
|  |
| Legal structure(eg CIC, CIO, Unincorporated) |  |
|  |
| Registered Charity Number(if applicable) |  |
|  |
| Registered Company Number(if applicable) |  |
|  |

**What service(s) does your organisation provide within the district?**

Include geographic focus and beneficiaries

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Does your project involve working with people under the age of 18 and/or vulnerable adults?**  | Yes/No |

If yes, please tick to confirm the following is in place:

|  |  |
| --- | --- |
| All employed staff and volunteers who work with under 18s/ adults at risk within regulated activity have an up-to-date DBS (CRB) check. | ❑ |
| DBS (CRB) checks are renewed every 3 years. | ❑ |
| A Safeguarding Children policy (if applicable) | ❑ |
| A Safeguarding Adults at Risk policy (if applicable) | ❑ |

**Which of the following Council priorities does your organisation help to deliver and how?**

|  |  |
| --- | --- |
| Providing advice |  |
| Providing welcoming (warmer) spaces |  |
| Tackling fuel poverty |  |
| Tackling food poverty |  |
| Providing support for those most at risk due to increased cost of living |  |

**Are there any other organisations undertaking similar activity in the same area?**

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| --- |
|  |

**Details of main contact person**

This must be the person who can talk about your application in detail.

|  |  |
| --- | --- |
| Name |  |
|  |
| Position |  |
|  |
| Daytime phone number |  |
|  |
| Email address: |  |

**Banking arrangements**

|  |  |
| --- | --- |
| Does your organisation have a bank account? | Yes/No |

|  |  |
| --- | --- |
| Does this bank account require the signatures of two unrelated people, living at separate addresses to access the account? | Yes/No |

If successful, payments will be made by Staffordshire Moorlands District Council directly into your bank account, please give details below:

|  |  |
| --- | --- |
| Account Name |  |
|  |
| Account Number: |  |
|  |
| Sort Code |  |

**SECTION 2 FINANCIAL SUPPORT REQUESTED**

|  |  |
| --- | --- |
| **Funding Requested**Maximum £3,000 | £ |

**Organisations must provide a match-funding contribution of at least one-third of the funding requested.**

|  |  |
| --- | --- |
| **What is your Match Funding Contribution:** | £ |

**Why is this funding needed? Please provide as much detail as possible.**

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| --- |
|  |

**What will the funding be used for? Please provide as much detail as possible.**

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**Does your organisation have cash flow issues that may force it to end its service provision within the next six months?**

**If yes, what measures are you putting in place/are putting in place to attempt to resolve the financial issues?**

|  |
| --- |
|  |

**How do you plan to monitor the success of your project? You will be required to submit monitoring information to Staffordshire Moorlands District Council**

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**SECTION 3 DECLARATION**

Please be aware that you are making this application at your own risk and we cannot be responsible to anybody for any loss, damage or costs arising directly or indirectly arising from this application.

* I have read, understand and accept the notes that came with this application form. I understand and agree to you using and publishing the information in this application. I agree that you can check the information in it and any supporting documents with other people and organisations.
* My organisation has the power to accept a grant, under your terms, and the power to pay back the grant if the terms are not being met.
* My organisation recognises and will support the Council’s commitment to equal opportunities and diversity, the safety of our communities, safeguarding the environment, and upholding the Nolan principles, My organisation will endeavour to ensure that the funding will not be used in a way that is inconsistent with these commitments.
* I understand that any misleading statements (whether deliberate or accidental) I give at any point during the application process, or any information I knowingly withhold, could mean my organisation’s application is not valid, in which case you will cancel the grant and claim back the money we have received, stop assessing and return the application, or withdraw any grant offered my organisation.
* I understand you will treat this information in line with the Data Protection Act 2018, and have read the Data Protection statement in the guidance notes. I accept that you may make this form available to members of the public under the Freedom of Information Act 2000. You will be notified. Personal information will be processed in line with Data Protection Act 2018.
* On behalf of my organisation, I agree that if we receive any grant from you, we will keep to the standard terms of grant and any further terms and conditions set out in the Grant Offer Letter.
* I confirm that, in the past five years (or, in the case of tax, the past three), neither the organisation (nor a member of a proposed consortium), nor any person with authority for either has, anywhere in the world, been found guilty of, liable for or threatened with:
* (a) Bribery, conspiracy, corruption, fraud, human trafficking, forced labour, money laundering, a proceeds of crime/drug trafficking or tax offence, terrorism, theft or similar
* (b) Not paying tax, social security contributions or their equivalent
* (c) Acting anti-competitively, breaching the terms or spirit of a public contract bid or contract, grave professional misconduct, any form of insolvency, breaching the Public Contracts Regulations 2015 or having an unresolvable conflict of interest under them
* (d) Tax offences, a civil penalty for fraud or evasion, returns found to be incorrect under the abuse principles or equivalent, or failure of an avoidance scheme

We take from your signature(s) on this form as confirmation that you:

* Have understood we have legal responsibilities under the Data Protection Act 2018 and the Freedom of Information Act 2000.
* Accept that we will not be responsible for any loss or damage you suffer as a result of us meeting these legal responsibilities.

Finally, I am authorised to put forward this application on behalf of my organisation and sign this declaration.

|  |  |
| --- | --- |
| **Print Name** |  |
| **Position within Organisation** |  |
| **Signature** |  |
| **Date** |  |

**SECTION 4 CHECKLIST**

Please go through the following checklist to ensure that you have enclosed all the information you need to make an application. Applications will not be considered if incomplete.

🞎 A completed grants application that is signed and dated by an appropriate person.

🞎 A signed and dated copy of your constitution / governing document.

🞎 A copy of your most recent set of accounts. (If you are a new organisation then a letter from your bank giving your organisation’s name and account number, if you have a bank account).

🞎 A copy of your Safeguarding Children Policy (if applicable)

🞎 A copy of your Safeguarding Adults at Risk Policy (if applicable).

🞎 Any other information that you feel will demonstrate what you have written in your application form (if applicable).