

# FARINGDON TOWN COUNCIL

The Pump House, 5 Market Place, Faringdon, Oxfordshire, SN7 7HL

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[www.faringdowntowncouncil.gov.uk](http://www.faringdowntowncouncil.gov.uk)

Clerk: Sally Thurston



## APPLICATION FOR FINANCIAL ASSISTANCE (INCLUDING YOUTH FUNDING)

### HOW TO FILL IN THIS FORM

Please read the **Policy for Awarding Grant Aid to Organisations** before you complete this form.

Please complete in BLOCK CAPITALS.

**Completion of all information required by this form is mandatory.**

Once completed, please return to the Town Clerk.

### 1. Your Details

Name of Organisation			
Project name (if different from above)			
Address of organisation			
Legal Status of organisation (please tick)	CIO	CIC	Unincorporated Organisation
Registered charity (enter number)	National Organisation	Other (please specify)	
Brief description of organisation			
Contact name of person with overall responsibility for this application			
Position held			
Contact telephone number (day)			
Contact email address			
Project address (if different from organisation address)			
Name of the person who will be responsible for the project spend			

Position held

What is the total cost of your project?

How much money is being requested from Faringdon Town Council?


**2. About the Project or Activity You are Planning**

Please describe what it is that you want to do with the grant. **(please keep your response to a maximum of 200 words)**

Delivery Start Date:	
Project planned,	
Location of project	
Project Completion Date:	

How do you know there is a local need for the project or activity?

**(Please keep your response to a maximum of 200 words)**

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Please specify the number of individuals, from within the parish boundary (appendix a) who will benefit from this project

How will you keep safe individuals, children, young people and vulnerable adults you'll be working with? (Please provide a copy of your safeguarding policy with your application)

Please indicate if your group has public liability insurance. (you should provide a copy of your public liability certificate with your application)

What other insurances does the group have? (if any)


**3. Meeting the Aims of the Council**

Please choose the theme that relates to the Councils priorities from the list below to indicate which of the themes your application is being submitted under.

Please tick applicable box(es)

	To tackle crime and anti-social behaviour in Faringdon		Provide a group that helps and supports Faringdon's residents
	To an event and /or opportunity for people in Faringdon		To meet the needs of vulnerable people or those with special needs who live in Faringdon
	An existing school council who wants to invest in local projects		An initiative that assists Faringdon's residents in gaining employment, education and training
	Improve the appearance of Faringdon, whilst celebrating its heritage and uniqueness.		Support environmental sustainability of Faringdon
	Connect and integrate the town with safer cycling and walking routes		Support the economic development of the Town Centre.
	Address the shortage of leisure space		Other, brief summary:

Tell us **(in a maximum of 200 words)** how the grant will help you achieve, all or part, of the theme you have selected. It is important that your application clearly links to at least **ONE** of the themes or it will not progress any further.

**NB: The activities you wish to provide must be activities that are not currently provided by other agencies and /or is not replacing or duplicating other organisations responsibilities.**

**4. Financial Details of Your Organisation**

Please provide the following details from your most recent annual accounts:

**Please input data below, DO NOT refer to any attached documents.**

If formal accounts are not kept, please estimate organisation's finances with supporting documentation. Also, please attach your cash flow for at least the next coming year.

Account year ending (day / month / year)	
Total (gross) income	
Total expenditure	
Balance at year end	

**Does your organisation have any reserves? If you have a reserves policy please send a copy with your application.**

Financial reserves can be one of three types. General Reserves can be used to pay for any activity that furthers your organisation's aims and objectives. Restricted Reserves are monies that must only be spent on a specific activity e.g. funding awarded for an event or Designated Reserves are made when your organisation decides to put money aside for a later purpose e.g. to replace equipment or refurbishment of a building.

General Reserves	£.....
Designated Reserves	£.....
Restricted Reserves	£.....
Total Monies Currently at Bank	£.....

If your reserves are more than your annual income, what are they for?

## 5. Financial Details of Your Project or Activity

Have you previously received funding from Faringdon Town Council for this project?  
(please tick box)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Amount of grant previously sought from Faringdon Town Council

£	<input type="text"/>
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Faringdon Town Council will look more favourably on your application if you have match funding (e.g. other funding) towards the cost of your project and are not applying for 100% of your project costs.

Tick here if you are applying for full grant:

### **If applying form Match Grant: Income sources for your project**

Income / Funding source	Application submitted Yes / No	Date when you expect a decision	2020/2021 £
Faringdon Town Council (applied for)	<b>Yes</b>		
Your own contribution?			
<b>Total</b>			

### **Detail of Costs for your project**

Please list expenditure items for your project (e.g. volunteer training, hire charges, fees). Your costs should add up & total the same as your income mentioned above. <b>NB: Faringdon Town Council will <u>NOT</u> fund retrospective expenditure that has already occurred or commenced.</b>	£
<b>Total</b>	

Reason for any deficit or high level of surplus (if applicable)

How do you propose to fund the deficit (if applicable)

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**Value of contributions in kind (c-i-k) e.g. volunteer hours/free use of room.**

Anticipated c-i-k	Status	(Monetary equivalent) £
<b>Total</b>		

**6. Value for Money**

Would the grant (if agreed) attract funds or support from other sources? If so how much and from where?	
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If you only received a percentage of the grant you requested tell us what you will be able to achieve based on:

75% of the grant request	
50% of the grant request	
25% of the grant request	

Please provide bank details should your application be successful:

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**7. Declaration**

I declare on behalf of the organisation that the information in this form is correct.

Signed

Date (day / month / year)

Name (block capitals)

Position held


\* If you are sending this form by e-mail you will need to print off this page, sign it and post it, with your supporting documentation to the Town Clerk.

**Checklist of documents you need to send us**

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Constitution or Aims and Objectives                                   |
| <input type="checkbox"/> | A recent bank statement   |
| <input type="checkbox"/> | Equal Opportunities statement   |
| <input type="checkbox"/> | Reserves policy (if applicable)                                       |
| <input type="checkbox"/> | Confidentiality or Data Protection Policy                             |
| <input type="checkbox"/> | Safeguarding Policy   |
| <input type="checkbox"/> | Proof of affiliation to Oxfordshire Youth if applying for youth grant |

**8. Permissions**

**Your privacy is important to us.**

We need to process your data to perform administration tasks.

We will comply with all data protection laws. We will only store your data for as long as we are legally required to do so.

You can find out more from our "Privacy Notice" which is available from our website or from the council Office or at

[www.faringdowntowncouncil.gov.uk](http://www.faringdowntowncouncil.gov.uk)

**Please confirm your consent below.**

Yes, I consent to Faringdon Town Council holding the data on this form for administration purposes only.

**For office use only**

Date Received	
Date of Grant Meeting	
Grant awarded	

