# Small Grants Application.

Please read the fund guidance notes before you complete this application. You can find these on the [WSCC website](https://www.westsussex.gov.uk/leisure-recreation-and-community/grants-and-funding/funding-for-voluntary-and-community-organisations/small-grants-fund/). You can increase the size of the text boxes if you are completing this form electronically. Please ensure you have done a free funding search on the [West Sussex 4 Funding](https://www.westsussex.gov.uk/leisure-recreation-and-community/grants-and-funding/search-for-funding-sources-and-advice/) portal on our website BEFORE you apply for this grant.

**Name of the project for which you are applying for funding. If this is a one-off event, please give the date it will take place:**

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**By what date do you need this funding?** (Please read point 2 of the Information for Applicants. Do not proceed with the application if this does not fit the criteria as we cannot make retrospective awards)

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**Describe what you want the money for in no more than 20 words.** You will have the opportunity to give more details later.

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# Section 1: Your Organisation.

* 1. **Details of your organisation:**

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| Organisation name: |  | | | |
| Organisation address: |  | | | |
| Organisation online presence: web address; Facebook group; Twitter handle etc |  | | | |
| Is this a membership organisation? | Yes |  | No |  |

* 1. **Where in West Sussex does your organisation operate?**

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* 1. **Who should we talk to in your organisation about this bid?**

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| Name: |  |
| Role: |  |
| Telephone/mobile number: |  |
| E-mail address: |  |

# 2: The Project.

* 1. **Where in West Sussex will the project take place, what area will it cover and how many people will it reach?**

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* 1. **The money you are applying for:**

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| Total amount applied for? | £ | | | |
| Is this total for the current year only (please tick)? | Yes |  | No |  |
| If no, how will you split the total grant over future years? | Amount per year |  | No. of years |  |
| If the amount applied for is less than the total cost of the project, please tell us the total cost (including the amount applied for) | £ | | | |
| Will any part of the grant be used for venue hire (please tick)? | Yes |  | No |  |
| If yes, state how much: | £ | | | |
| And state which venue you intend to hire: |  | | | |
| Are you currently waiting to hear about grants for the same project element from any other funders? | Yes |  | No |  |
| If yes, when will you know the outcome of the other bid(s)? |  | | | |
| Please state the total amount your organisation has in reserves? | £ | | | |
| State the amount and purpose of any restricted reserves | £ | | | |
| Purpose: | | | |
| Is your organisation eligible to reclaim VAT (please tick)? | Yes |  | No |  |
| If yes, please provide your VAT number: |  | | | |
| AND ENSURE THAT YOUR APPLICATION DOES NOT INCLUDE FUNDS THAT WILL BE RECLAIMED | | | | |

* 1. **Please describe in no more than 500 words how the money will be spent, what your activity is going to achieve and who will benefit.**

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* 1. **If the application is for a membership organisation, please explain how the wider community will benefit.**

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**2.5 Explain how this funding supports local people helping one another**

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**2.6 Explain how this funding helps people to access local community support**

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* 1. **Explain how this funding contributes to the 5 Ways to Wellbeing outcomes**

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| **Connect** |  |
| **Be active** |  |
| **Take notice** |  |
| **Keep learning** |  |
| **Give** |  |

* 1. **How might you share the skills, knowledge, experience, equipment or facilities that the grant helps to pay for, with other groups or the wider community?**

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**Terms and Conditions**

1. All organisations that receive a grant from WSCC must have a UK-based bank or building society account in the name of their organisation as shown on their governing document.
2. The grant applied for must be used within 12 calendar months of the allocation being received unless otherwise agreed.
3. The funding must be used only for the purpose specified in the application. The applicant will be responsible for the expenditure of the monies allocated and may be required to report to the Council how this grant has been spent.
4. If for any reason the project cannot be delivered or the organisation ceases to exist you must notify the Council and if so requested, return any equipment or unspent grant.
5. Organisations cannot apply to more than one WSCC fund, ie: Small Grants, CIF or MBSF, either concurrently or subsequently in the same financial year, for partial or whole funding of the same project.
6. West Sussex County Council accept no liability whatsoever in respect of any complaints, claims or actions arising from or associated with any funded project.
7. People who work with children or other vulnerable members of society, whether they are volunteers or paid staff, must receive the appropriate Disclosure and Barring Service (DBS) clearance to ensure they are suitable to do so.
8. Organisations receiving funding awards will be required to report back on delivery of their outcomes.
9. Organisations receiving funding will be required to add their details to the [West Sussex Connect to Support](https://www.westsussexconnecttosupport.org/s4s/WhereILive/Council?pageId=574&lockLA=True) website as appropriate, and from time to time will be asked to help with West Sussex County Council promotions.
10. Successful organisations must acknowledge our funding support in any promotional activities and publicity material and must invite the local Member and an officer from the Partnership and Communities Team to engage with relevant activities, eg: an invitation to meet you, see activities in action, or find out more about your achievements etc.

**Bank Details**

If your application is successful, you will receive payment by electronic transfer. You must have a UK-based bank or building society account in the name of your organisation.

**Please complete this section before signing and submitting this application form:**

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| Name of account/payee: |  |
| Bank Name and Bank Branch: |  |
| Sort Code: |  |
| Account Number: |  |

# Please turn over. You must complete and sign the declaration overleaf before submitting this application.

# Declaration.

**I understand I may be required to provide the following documentation to support my application:**

* Current financial position statement, most recent accounts or bank statements
* Quotes, estimates or receipts covering all specific elements of the total application sum
* Copies of insurance documents (where appropriate)
* Children/Young People/Vulnerable Adults policy and procedure details (where appropriate)

**By signing the box below /clicking submit I agree to the following:**

* I am authorised to make the application on behalf of the above organisation.
* I give permission for WSCC to record the details of my organisation and to correspond with the key contact as detailed in the application.
* I certify that the information contained in this application is correct and that any seriously misleading statements (whether deliberate or accidental) at any stage during the application process, or knowingly withholding any information, could make my application invalid.
* I will inform WSCC if the information in the application changes in any way.
* I understand that WSCC will work with other parties to assess the application.
* I have read, understood and will comply with the Small Grants Terms and Conditions.

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| **Organisation name:** |  |
| **Signed:** |  |
| **Name:** |  |
| **Position:** |  |
| **Date:** |  |

**For Office Use Only**

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| Cabinet Member Decision Report reference: |  |
| Payment amount: |  |
| Date: |  |
| Verification signature: |  |