# Members’ Big Society Fund Application.

Please read the fund guidance notes before you complete this application. You can find these on the WSCC website. 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:** **(20 words max)**

|  |
| --- |
|  |

**Describe what you want the funding for (20 words max – there will be opportunity for more detail later)**

|  |
| --- |
|  |

**Name of Local Member(s):**

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Amount of your funding bid (between £5,001 and £20,000):** |  |
|  |  |
| **Total project cost (including bid monies):**  |  |
|  |  |

# Section 1: Your Organisation.

* 1. **Name of your organisation:**

|  |
| --- |
|  |

* 1. **What does the organisation do? (20 words max)**

|  |
| --- |
|  |

* 1. **Where in West Sussex does your organisation operate? (20 words max)**

|  |
| --- |
|  |

* 1. **Your organisation’s aspirations / aims (This section is optional)**

|  |
| --- |
|  |

* 1. **Key Contact 1: Project Contact**

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

* 1. **Key Contact 2: Responsible Officer**

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

# 2: The Project.

* 1. **Where in West Sussex does/will the project happen?** **(20 words max)**

|  |
| --- |
|  |

* 1. **What evidence do you have to show your project is needed? (100 words max)**

|  |
| --- |
|  |

* 1. **Who will directly benefit from the project? (100 words max)**

|  |
| --- |
|  |

* 1. **How will your project benefit the wider community? (100 words max)**

|  |
| --- |
|  |

* 1. **Describe the outcomes your project will achieve and how you will measure this (100 words max)**

|  |
| --- |
|  |

* 1. **How do you work with other organisations in your local area? How can they support your project outcomes? (100 words max)**

|  |
| --- |
|  |

* 1. **How does this funding support the ambitions of the Future West Sussex Plan? (100 words max)**

|  |
| --- |
|  |

* 1. **How does this funding help people to be independent and/or reduce social isolation, and/or strengthen local communities so they can support each other? (150 words max)**

|  |
| --- |
|  |

* 1. **How does this funding contribute to the 5 Ways to Wellbeing outcomes ?**

|  |  |
| --- | --- |
| **Connect** | (75 Words max) |
| **Be active** | (75 Words max) |
| **Take notice** | (75 Words max) |
| **Keep learning** | (75 Words max) |
| **Give** | (75 Words max) |

# Section 3: Foundations – Facts and Figures

* 1. **What is the legal structure of your organisation? When was it established?**

|  |
| --- |
|  |

* 1. **Registered Address:**

|  |
| --- |
|  |

* 1. **Registered charity Number (if applicable)**

|  |
| --- |
|  |

* 1. **Describe any fees, subscriptions or membership criteria (150 words max)**

|  |
| --- |
|  |

* 1. **Please provide the following financial information from your most recent accounts**

|  |  |  |  |
| --- | --- | --- | --- |
| **Period Covered**  | mm/yy | to | mm/yy |
| **Total Income** | £ |
| **Total Expenditure** | £ |
| **Balance at year end** | £ |
| **Reserves (savings, cash, investments, assets)** | £ |
| **Of these reserves how much is allocated for other purposes?** | £ |
| **Please detail for what other purpose(s):** |

* 1. **Is your organisation eligible to reclaim VAT?**

|  |  |
| --- | --- |
| **No** |  |
| **Yes**  |  | **if so please provide your VAT Number:** |

**IF YES, PLEASE ENSURE THAT YOUR APPLICATION DOES NOT INCLUDE FUNDS WHICH WILL BE RECLAIMED**

* 1. **How you will use the funding to achieve your outcomes? Please indicate which aspects of your project are desired or essential**

|  |
| --- |
|  |

* 1. **How will you spend the funding over the next 12 months?**

|  |
| --- |
|  |

* 1. **What funding have you already received from West Sussex County Council towards your project?**

|  |
| --- |
|  |

* 1. **What other fundraising activities have you undertaken in relation to this project? Also include other grant funding your organisation has received or applied for in relation to this project? (add more rows if necessary)**

|  |  |
| --- | --- |
| **Activity:** | **£**  |
|  |  |
|  |  |
|  |  |
|  |  |

**3.11 How will this funding help you to sustain the outcomes of your project over the next 3 to 5 years? (50 Words max)**

|  |
| --- |
|  |

* 1. **What are the risks and dependencies to your project delivery?** **(50 Words max)**

|  |
| --- |
|  |

# 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. Cheques, internet and other withdrawals must be signed or authorised by at least two people who are not related to each other and do not live at the same address.
3. Grants will be made in one of the following ways: Immediate payment of funds, Payment on completion/ submission of receipts, commitment to fund at a later date. This will be discussed, agreed with the applicant and confirmed in writing.
4. The grant applied for must be used within 12 calendar months of the allocation being received unless otherwise agreed.
5. 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 will be required to report to the Council how this grant has been spent.
6. 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
7. 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.
8. West Sussex County Council accept no liability whatsoever in respect of any complaints, claims or actions arising from or associated with any funded project.
9. People who work with children or other vulnerable members of society, whether they are volunteers or paid staff, will receive the appropriate Disclosure and Barring Service (DBS) clearance to ensure they are suitable to do so.
10. Organisations receiving funding will be required to report back on progress.
11. 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.
12. Successful organisations must acknowledge our funding support in any promotional activities 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.

# 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
* Governance documents (written constitution, memorandum/articles of association, community interest statement)
* Copies of insurance documents
* 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 MBSF Terms and Conditions.

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

**Members Big Society Fund**

**Supporting Statement.**

This application is supported by ……………………….…………….…………………………………………

Member for …………………………………………………….……………………………..……………………………..

Please state below, in up to 250 words, why you support this application.

Members should provide information on:

* Why the project is needed in the local community
* How well you know the group
* How you support the group and their activities
* How confident you are that the group can deliver the project

|  |
| --- |
|  |

If applicable, please declare any a personal interest in the project or the organisation:

I wish to declare a personal interest in this project or organisation in my role as:

|  |
| --- |
| *(for example Chairman, club member, Trustee, etc.).*  |

Signed ……………………………………………………………………………………………Date……………………………………….