

Causeway Coast and Glens Borough Council

SOCIAL INCLUSION GRANT APPLICATION FORM

**APPLICATION TO BE RETURNED BY:
Monday 21st September 2015 no later than 4.00pm**

LATE APPLICATIONS WILL NOT BE CONSIDERED

For Official Use Only				
Date Received:			Signed:	
Acknowledged:	YES	NO	Grant Reference No:	

Causeway Coast and Glens Borough Council Social Inclusion Grant 2015

If you have any queries regarding the application you should contact one of the Community Development Officers (see contact details below). Please note that you should keep a photocopy of your application for reference.

Once your application form is completed please return signed documentation with all additional information as indicated to one of the four drop-off locations stated below:

1. For the attention of:
The Community Development Officer
Causeway Coast & Glens Borough Council
Ballymoney Town Hall
1 Townhead Street, Ballymoney
County Antrim BT53 6BE
Telephone: (028) 276 60230

2. For the attention of:
The Community Development Officer
Causeway Coast & Glens Borough Council
Cloonavin
66 Portstewart Road
Coleraine BT52 1EY
Telephone: (028) 703 47032

3. For the attention of:
The Community Development Officer
Causeway Coast & Glens Borough Council
7 Connell St
Limavady BT49 0HA
Telephone: (028) 777 60311

4. For the attention of:
The Community Development Officer
Causeway Coast & Glens Borough Council
Sheskburn House
7 Mary Street
Ballycastle
Co. Antrim BT54 6QH
Telephone: (028) 207 62225

Organisation Name:	
Name of person we should contact about the application:	
Email:	
Contact Tel. No.:	

****Part 1 (Organisation Details) of this application form should only be completed if you have not already applied for a Community Grant from Causeway Coast and Glens Borough Council in 2015.***

Organisations that have already submitted an application for Community Festival Funding in 2015 can go straight to Part 2 (Project Details) on page 12*

Please note that organisations that have been successful in their application for a Community Development Support Grant from Causeway Coast and Glens Borough Council in 2015 are not eligible to apply for a Social Inclusion Grant.

PART 1 : ORGANISATION DETAILS

****Only to be completed by organisations that have not yet applied for a grant from Council in 2015.***

A: Eligibility & Enclosures Checklists

Eligibility Checklist

Please confirm by ticking **all** the boxes below that your organisation is a formally constituted organisation with a responsible Management Board or Committee that conforms to the following eligibility criteria:

1.	We are based in the Causeway Coast and Glens Borough Council area and/or our activities /beneficiaries are based in the Causeway Coast and Glens Borough Council area.	TICK
2.	We have a constitution /governing document that has been adopted at a public meeting.	
3.	We have a bank/building society account and keep a proper record of its accounts.	
4.	We have arrangements in place for dispersing the group's funds if we were to dissolve / end. (This should be stated in your governing documents)	
5.	We operate on a not-for-profit basis and cannot share out profits to members or shareholders.	
6.	We produce an annual statement of independently audited or certified accounts, or in the case of a new group will present a bank statement where this is not available.	
7.	We ensure appropriate and adequate insurance cover for all our activities and all actions, proceeding, costs, claims, demands and liabilities whatsoever arising from all or any of our activities. We also ensure that any individuals or organisations we work with are properly insured.	
8.	We are non-party political. We do not seek to promote any political activity and are open to the full range of public opinion.	
9.	We are a community based organisation committed to advocating community participation, community involvement, community	

	progression and the promotion of a sense of community ownership and pride which contributes in a positive way to the development of our local community.	
10.	We have a Child Protection Policy and all other relevant policies and procedures in place including Access NI checks completed on all staff, coaches and volunteers as appropriate. This is up to date and fit for purpose and complies with all relevant legal and regulatory requirements for our organisation including all services and activities for which our organisation is wholly liable.	
11.	We have a membership which is open to all those residing in the area that we seek to represent in accordance with Section 75 of the Northern Ireland Act (1998) i.e. regardless of racial group, age, gender, religious belief, political opinion, marital status, sexual orientation, disability or having dependants etc. In addition, without prejudice to our obligations above, we have regard to the desirability of promoting Good Relations between persons of different religious belief, political opinion or racial group.	
12.	We ensure that all our activities abide by the law. If required, we obtain the necessary permissions for our activities from the appropriate body/authority.	
13	We can demonstrate that we work closely with other organisations in the same area or neighbourhood to avoid duplication of activities.	
14	We are accountable to local people through our constitution /governing document, membership, committee elections, accounting procedures and Annual General Meetings. The Office Bearing positions of Chairman, Secretary and Treasurer are held as a minimum.	
15.	We have fulfilled group registration requirements for inclusion on the Government Funding Database (GFD).	
16.	We agree to Causeway Coast and Glens Borough Council's promotion, monitoring, evaluation, and training procedures as required.	

If you require clarification or guidance on any of the items in the above checklist, please contact one of the Council's Community Development Officers to discuss.

Enclosures Checklist

Please confirm by ticking all of the boxes below that you have supplied the information requested to support your application:

Your grant application is unlikely to be progressed if you cannot provide any of the documentation required. Whilst we do not ask for copies of your organisational policies/procedures, licences, permissions, risk assessments etc. at this stage, please be aware that these may be requested and required, if your application for funding is successful.

1	Fully completed Part 1 application form .	<u>TICK</u>
2	Fully completed Part 2 application form relevant to the category of grant applied for.	
3	A copy of your organisation's <u>original signed and dated</u> constitution /governing document .	
4	A copy of your organisation's most recent, signed annual accounts signed as agreed by the board of directors or management committee.	
5	A copy of up to date insurance certification covering your organisation and its activities as appropriate.	
6	Copies of bank statements for the last quarter i.e. three months.	
7.	Copy of latest Annual Report for the organisation.	
8.	Copy of minutes from the latest Annual General Meeting or latest available set of minutes if a new group.	

B –About Your Organisation

1. Please provide your organisation's details.

Organisation Name:	
Address	
Postcode:	
Telephone No:	
Website:	
E-mail:	
Mobile Tel. No.:	
VAT Registration No.	
Government Funding Database (GFD) – Unique Reference No.	URN:
Name of person we should contact about this application:	
Address (if different from above):	
Postcode:	
Telephone No:	
E-mail:	
Mobile Tel. No.:	
Position in organisation:	

2. Please give a brief description of **up to** five main objectives for your organisation (*bullet points are sufficient*).

Objective 1	
Objective 2	
Objective 3	
Objective 4	
Objective 5	

C –Management and Governance of your Organisation

1. Is your organisation:

A company Limited by Guarantee		Registration Number	
An unincorporated organisation			
A different type of organisation		Please specify	

2. Is your organisation a registered charity?

No			
Yes		Registration Number (if allocated)	

Please describe which stage you have reached in the registration process for your organisation with the Charities Commission NI:

3. Please list the members of your organisation’s board or management committee.

Name	Position
e.g. John Smith	Chairperson

4. How often does your management committee or board meet? *(please tick one)*

Every week	<input type="checkbox"/>	At least Twice a year	<input type="checkbox"/>
Every Month	<input type="checkbox"/>	At least Once a year	<input type="checkbox"/>
Every Quarter	<input type="checkbox"/>	We have no fixed schedule	<input type="checkbox"/>

5. What is the maximum length of term of office for management committee or board members?

One year only	<input type="checkbox"/>	Three – five consecutive annual terms only	<input type="checkbox"/>
Two consecutive annual terms only	<input type="checkbox"/>	There is no restriction on the length of office	<input type="checkbox"/>

6. Are any of your employees or members of your organisation’s board or management committee, Causeway Coast and Glens Borough Council elected members (Councillors) or employees of Causeway Coast and Glens Borough Council, or are they related to an elected member or employee?

No	<input type="checkbox"/>
Yes (Please list below)	<input type="checkbox"/>

7. Please provide details of the person responsible for the day-to-day financial management within your organisation:

Name:	
Phone	
E-mail:	

8. Bank Account details:

Name of bank or building society:	
Branch Address:	
Sort code	
Address	
Post Code	
Name of account :	
Account No.	
Period of Financial Year	
	From: (Month) To: (Month)
Total Income and Expenditure in the Last Financial Year	Income Last Year: _____ Expenditure Last Year: _____

PART 2: PROJECT DETAILS

All applicants must complete this section of the application form. Please refer to Guidance Notes to help with your responses.

1. Please provide details of the **project or activities** that you are planning.

2. Which District Electoral Area do the people who will primarily benefit from your project live in (*please tick*):

District Electoral Area	✓
Ballymoney	
The Glens	
Causeway Coast	
Coleraine	
Bann	
Benbradagh	
Limavady	

3. Section 75 and Schedule 9 of the NI Act 1998 recognises a statutory obligation towards a range of groups including those of different religious belief, political opinion, racial group, age, marital status, sexual orientation, gender, those with or without disabilities, and those with or without dependants. There may be other groups that your project primarily benefits such as those living in isolated rural areas, people on low incomes etc.

Please state which group(s) your project <u>primarily</u> benefits.	
Approximately how many people will benefit?	

4. Please explain how your project or activities will promote **Social Inclusion** in your community? *(please refer to page 8 of the Guidance Notes)*

5. How many people are engaged in the work of your organisation?

Number of Full Time Employees		Number of Part-Time Employees	
Number of Training placements		Number of Volunteers	

6. Please provide a breakdown of your project costs.

Item	£
TOTAL	

7. How much are you requesting from Causeway Coast and Glens Borough Council? (remember no more than 85% of costs up to a maximum of £500)

£	
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8. a. Are you seeking funding from any other sources for your project?

Yes		No	
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b. If yes, please indicate how the remaining funds will be raised

Source of funding	Amount (£)	Status Secured/ Pending

c. If no, please indicate how you will meet the balance of costs eg. Organisation reserves, fundraising, income generated etc.

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Declaration

Causeway Coast and Glens Borough Council has a duty to protect public funds and so must make sure that organisations who receive grant funding meet certain regulations. By signing below you are confirming the following:

- The organisation named on this application has given me the authority to make this application on their behalf.
- The organisation's programme of activities is in line with our constitution or memorandum and articles of association, and the organisation is a formally constituted, not-for-profit organisation.
- If we are successful with our application, we will adhere to the conditions of the grant as outlined in any letter of offer issued and use the funds awarded only for the purposes advised.
- We accept that the information provided in our application may be made available to other Causeway Coast and Glens Borough Council Departments and other agencies for the purposes of:
 - preventing or detecting crime, including fraud;
 - making sure nobody is receiving 'double funding' i.e. more than one grant for the same services/items;
 - meeting Council's internal and external audit requirements; and
 - contacting the organisation about future funding opportunities or for feedback as part of Causeway Coast and Glens Borough Council's commitment to providing good public services.
- The organisation will adhere to Causeway Coast and Glens Borough Council guidelines on using all required branding / logos in any publications, marketing or media releases,
- The organisation understands that any information supplied that is deliberately false or misleading may result in prosecution.
- In line with the Data Protection Act 1998 and the Freedom of Information Act 2000, Causeway Coast and Glens Borough Council may release any information in this form in response to a 'Data Subject Access' or 'Freedom of Information (FOI) request'.

N.B. If any information in this application is found to be untrue we will withdraw the grant awarded. If we have already paid part of a grant to your organisation, you must repay it. This will have implications for any future applications or requests for funding and we may also review grants made to your organisation in the past.

Please note incomplete or unsigned applications may result in rejection. This declaration must be signed by two Committee Members of your organisation. At least one of the signatories must be either the Chairperson, Vice Chairperson, Treasurer or Secretary. We also request that a day-time telephone number is supplied.

1. Name		Position in organisation	
Address		E-mail Address	
Telephone		Mobile Telephone	

2. Name		Position in organisation	
Address		E-mail Address	
Telephone		Mobile Telephone	

We certify that all information given is correct and **that we have read the guidelines provided and have based our application on the guidance notes contained within it.** We agree to abide by the set criteria should this application be successful. We agree to provide event/project report as required. We agree to publicise support from Causeway Coast and Glens Borough Council as required and to meet with the assigned Officer, if requested, during the project.

1. Signature		Date	Position
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2. Signature		Date	Position
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Closing Date: 4.00 pm on Monday 21st September 2015

It is the responsibility of each applicant to ensure that their application is submitted prior to the time and date of closing. Please note that applications received after the closing time/date will not be considered for funding and there is no recourse to appeal. No exceptions will be made. It is the responsibility of the applicant to ensure delivery in time and that correct postage is paid if posting an application. All applications received prior to the time and date of closing will be acknowledged in writing.

FOR OFFICE USE ONLY

Grant allocated: Yes / No

If yes £ _____

Comments :-

Signed: _____

Date:
