**Community Development Support**

**Fund – Anchor Organisation Application Form**

This grant is open to Community organisations who have a constitution and an organisational bank account. If you would like any help or advice in planning your activity or filling in this form then please contact the Well Doncaster / Community Wealth Builder Team, see guidance notes for details.

This application form is to be filled out alongside the guidance notes, questions may refer to the guidance notes for support or more information.

Guidance notes for completion of this form *appear in italic writing.* We need as much detail as possible when you complete the form. All questions marked \* must be completed. Any applications that are not fully completed will not be considered.

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| **\*Q1. Name of constituted group or organisation** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **\*Q2. Application Checklist**  *Please tick the applicable boxes* | | | | | | | | | | | |
| **Yes** | **No** | **Questions** | | | | | | | | | |
|  |  | Is the activity in Doncaster? | | | | | | | | | |
|  |  | Do you have a bank or building society account with at least 2 signatories? If yes, please complete section 3b (If you do not have a bank account, please contact the Community Wealth Builder Team for support) | | | | | | | | | |
|  |  | Do you have a simple governance structure? If yes, please send a copy with your application | | | | | | | | | |
| **\*Q3a. Contact Details** | | | | | | | | | | | |
| **Name:** | | | | |  | | | | | | |
| **Position:** | | | | |  | | | | | | |
| **Telephone Number(s):** | | | | |  | | | | | | |
| **Email:** | | | | |  | | | | | | |
| **Address & Post Code:** | | | | |  | | | | | | |
| **\*Q3b. Bank Details** | | | | | | | | | | | |
| **Name of Bank (e.g. NatWest)** | | | | | | | | |  | | |
| **Group/Organisation name as it appears on bank account:** | | | | | | | | |  | | |
| **Sort Code:** | | |  | | | **Account number:** | |  | | | |
| **Q4. Where did you hear about the grant?** *Please tick box as appropriate* | | | | | | | | | | | |
| City of Doncaster Council Staff | | | | Community Organisation | | | | Word of mouth | | | |
| City of Doncaster Council website | | | | Social Media | | | | ☐ Other - Please specify | | | |
| **\*Q5. Please outline how you are an anchor organisation within the local community? (Max 500 words) An anchor organisation is defined as a larger organisation (non-profit) that supports the local community through experienced delivery of services that follow the themed activity listed.** Please refer to the guidance notes for more information including themed activity. | | | | | | | | | | | |
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| **\*Q6. What are you applying to the grant for? Please tell us about the activity you plan to deliver (Max 700 words)**  **Please refer to guidance notes for themed activity.**  *When answering please:* | | | | | | | | | | | |
| * *Be clear and precise* * *State what your activity(ies) / project is and how it will benefit the community – see guidance notes* | | | | | | | * *Use bullet points to clearly set out your answer if you wish* | | | | |
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| **\*Q7. Please outline who this grant will benefit and the impact you expect to see in the local community (Max 500 words)** | | | | | | | | | | | |
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| **\*Q8. How do you plan to make your activity accessible to all members of the community? (Max 500 words)** | | | | | | | | | | | |
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| **\*Q9. What other information do you feel we need to know to strengthen your application? Max 300**  *Please refer to the Guidance Notes* | | | | | | | | | | | |
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| **\*Q10. Please provide a breakdown of what the grant will pay for. (Please refer to the guidance notes for more information on spending requirements)** | | | | | | | | | | | |
| **Description:** | | | | | | | | | | **£ per item/activity** | |
|  | | | | | | | | | | **£** |  |
|  | | | | | | | | | | **£** |  |
|  | | | | | | | | | | **£** |  |
|  | | | | | | | | | | **£** |  |
|  | | | | | | | | | | **£** |  |
| **Total grant requested (maximum of £25,000):** | | | | | | | | | | **£** |  |
| **Total contribution from you, or any other funder (This is optional):** | | | | | | | | | | **£** |  |
| **Total cost of activity:** | | | | | | | | | | **£** |  |

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| **Declaration:**  **This document will be used for monitoring and auditing purposes in line with Doncaster Council’s Financial Rules.**  **I hereby declare on behalf of** Click or tap here to enter name of group/organisation **that:**   * The information given on this form is correct to the best of my knowledge * The organisation/group is a non-profit making body * Any grant made by the Council to the organisation in response to this application will be used for those activities of the organisation for which the grant is given and in accordance with the objectives of the organisation * The organisation/group will keep proper accounts of its income and expenditure and will make these available for inspection by Council Officers at any reasonable time * The individual/group will maintain regular communication with the Council, and will allow the Council to visit/view the activity upon request * The organisation agrees to sign up and engage with the Community Development Support Fund. * The organisation/group will complete a case study and a short questionnaire provided by the Council, within 3 months of receipt of funding. The case study, details of the grant activity and short questionnaire responses may be to the City of Doncaster Council website and shared with partners as good news stories. * Should the grant be awarded, the amount will be itemised in the organisation’s annual accounts * No member of the organisation’s management committee has any relationship with serving members and/or officers of the Council   **I also understand that:**   * Details of this application will be shared with third parties associated with the delivery of the Community Development Support Fund, Communities Team, Community Wealth Builder Team, St Leger Homes, South Yorkshire Police * Payment or refusal of a grant lies entirely within the Council’s discretion. * The grant must be used for the purpose set out in the guidance notes. * It is the Council’s policy not to make further repeat grants to organisations/groups for any one particular project or activity during the same financial year as the original grant. The award of the grant by the Council on this application will not necessarily commit to a further grant in the future. If a group/ organisation wishes to reapply or apply for additional grants, this will be reviewed on a case-by-case basis.   **Please note:** CDC is subject to the Freedom of Information Act 2000, and other legislation. Most of the information you supply to the Council may be made public.  **I confirm that the group/organisation named on the front of this application, has authorised me to sign on its behalf. I can confirm that the information given in this form is true.**  **Full Name: Position in group:**  **Signature: Date:**  **Please return the completed form together with a copy of your GOVERNING DOCUMENT and any evidence to support your application to arrive no later than 29 April by email:** [**Community.WealthBuilder@doncaster.gov.uk**](mailto:Community.WealthBuilder@doncaster.gov.uk)   |  |  | | --- | --- | |  |  | |