



# ACTON GARDENS COMMUNITY CHEST

## Application form

1. Organisation details	
Organisation name	
Address	
Postcode	
Telephone number	
Email address	
Website address	
<b>What type of organisation are you?</b> (please tick one)	<input type="checkbox"/> Resident's Association <input type="checkbox"/> Community Group <input type="checkbox"/> Registered Charity <input type="checkbox"/> Company Limited by Guarantee <input type="checkbox"/> Social Enterprise <input type="checkbox"/> Community Interest Company <input type="checkbox"/> Statutory organisation  Number _____ Number _____ Number _____
<b>Organisation description</b> (aims and activities)	
<b>Organisation's annual income</b> (please tick one)	<input type="checkbox"/> Less than £50,000 <input type="checkbox"/> Between £50,000 and £250,000 <input type="checkbox"/> Over £250,000

## 2. Applicant details

Title		
First name		
Surname		
Position/job title		
Telephone number		
Email address		
How did you hear about the Acton Gardens Community Chest? (Please tick one)	<input type="checkbox"/> Newsletter <input type="checkbox"/> Word of mouth <input type="checkbox"/> Community centre <input type="checkbox"/> Partner organisation	<input type="checkbox"/> Poster <input type="checkbox"/> Website <input type="checkbox"/> Other _____

## 3. Previous applications

<b>Have you previously received funding from the Community Chest?</b>  Please note: Community Chest funding is designed to help start projects and it is not designed to continuously provide funding.	<input type="checkbox"/> Yes (answer the remaining questions in this section)	<input type="checkbox"/> No (go to question 4)
How many projects have you had funded by the Community Chest in this financial year (April to March)?		
What was the name(s) of the project(s)?		
When was/were the project(s) held?		
How much funding did the project(s) receive from the Community Chest?		
Did you provide an evaluation form to Acton Gardens following completion of the project(s)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you reapplying for funding to deliver the same project(s)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Why is there a need to continue the project(s)?		

#### 4. Project Details

Project name	
Project description	
When will your project run?	
Project location	

#### 5. Project costs

Overall project cost			
Amount requested from Community Chest (max £5,000)			
What will the funding be spent on?	<b>Item</b>	<b>Cost</b>	<b>Cost breakdown</b> (eg £10 per hour x 5 hours x 5 sessions)
	Rent/venue hire		
	Staff		
	Volunteer expenses		
	Equipment/materials		
	Insurance		
	Training		
	Other costs (please specify)		
	1.		
	2.		
	3.		
<b>TOTAL</b>			
How will you secure funding outside of the Community Chest for the project?	<b>Source</b>	<b>Amount</b>	<b>Secured/Expected/Applied</b>
		£	
		£	
		£	
	<b>Total</b>	£	

<p>How does the project demonstrate good value for money?</p>		
<p>Will all staff on the project be paid the London Living Wage?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If no, please explain why staff will not be paid the London Living Wage?</p>		
<p>If you are purchasing equipment or other permanent assets, what will happen to them when the project ends?</p>		
<p>If the organisation has reserves worth more than six month's running costs, please tell us why this can't be used to fund the project.</p>		

## 6. Project need and participants

<p>What is the need for your project and how can this be evidenced?</p>		
<p>What are the project's three main objectives?</p>	<p>1.</p>	<p>2.</p>
	<p>3.</p>	

<p>What skills and experience do your staff, volunteers and organisation have to successfully deliver the project?</p>			
<p>Who will participate in your project?</p>			
<p>How many people will participate?</p>		<p>Numbers</p>	<p>% who will be Acton Garden and South Acton residents</p>
	<p>Direct beneficiaries (i.e. project participants)</p>		
	<p>Indirect beneficiaries (i.e. audience)</p>		
	<p>Total</p>		
<p>How will you recruit participants from South Acton and Acton Gardens?</p>			
<p>Are you working with any partners? If so, please tell us who they are and how they will contribute to the project.</p>			
<p>What opportunities will the project create for Acton Gardens and South Acton residents? (eg work experience/ placements, jobs)</p>			
<p>Outline the main risks associated with the project and how these will be managed.</p>			

<p>If the project involves working with children or vulnerable adults, please outline how participants will be safeguarded.</p>	
<p>How will the organisation evaluate the project both during and after the activities have taken place?</p>	
<p>Once the award has been spent, how does the organisation intend to continue the project?</p>	

## 7. References

<p><b>Reference 1 –</b> Someone external to the organisation</p>	Name	
	Organisation	
	Relationship to you	
	Address	
	Telephone Number	
	Email Address	
<p><b>Reference 2 –</b> Someone senior within your organisation (Trustee, Chair, CEO, etc)</p>	Name	
	Organisation	
	Relationship to you	
	Address	
	Telephone Number	
	Email Address	

**8. Document checklist (tick yes if supplied with application form)**

Organisation's Constitution, Memorandum & Articles of Associations and other governing documents	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Health & Safety Policy	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Safeguarding Children Policy and Safeguarding Adults Policy (if applicable)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sight of Disclosure and Barring Service (DBS) certifications for staff and volunteers working with children and vulnerable adults	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Public Indemnity Insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Employers Liability Insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Record of audited annual accounts. If new, please submit the latest bank statement and a 12-month financial projection.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**9. Declaration**

I understand that information in this form will be used for assessment and monitoring purposes. I understand that details will be recorded on a database, which will be used to gather general information that may be made public (individual details will not be made public without permission from the organisation).

I confirm that to the best of my knowledge that all the information provided is true and correct. I understand that Acton Gardens LLP reserves the right to recover all or part of any Community Chest award in the event of non-compliance with the terms of the award.

I confirm that all relevant documentation has been provided and that the group/organisation is adequately covered for all liabilities from the running of the activity/project.

I accept that Acton Gardens, its partners, agents or employees are not liable for any costs, losses or damages incurred as a direct result of the activity or project taking place.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_