



# ACTON GARDENS COMMUNITY CHEST

## Application form

### 1. Organisation details

<b>Organisation name</b>		
<b>Address</b>		
<b>Postcode</b>		
<b>Telephone number</b>		
<b>Email address</b>		
<b>Website address</b>		
<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

Have you previously received funding from the Community Chest?  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?	Item	Cost	Cost breakdown (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.			
TOTAL			
How will you secure funding outside of the Community Chest for the project?	Source	Amount	Secured/Expected/Applied
		£	
		£	
		£	
	Total	£	

How does the project demonstrate good value for money?		
Will all staff on the project be paid the London Living Wage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, please explain why staff will not be paid the London Living Wage?		
If you are purchasing equipment or other permanent assets, what will happen to them when the project ends?		
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.		
<b>6. Project need and participants</b>		
What is the need for your project and how can this be evidenced?		
What are the project's three main objectives?	1.	
	2.	
	3.	

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

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

### 7. References

Reference 1 – Someone external to the organisation	Name		
	Organisation		
	Relationship to you		
	Address		
	Telephone Number		
	Email Address		
Reference 2 – Someone senior within your organisation (Trustee, Chair, CEO, etc)	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
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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: \_\_\_\_\_

For assistance with your application or for further information, please contact the Acton Gardens Regeneration team on:  
 Email: [Yoursouthacton@lqgroup.org.uk](mailto:Yoursouthacton@lqgroup.org.uk)  
 Address: Acton Gardens, Unit B, Donne Court, Bollo Bridge Road, W3 8YG  
 Phone: 0300 456 9998 ext 7325