

# APPLICATION FORM 2018 – 2019

# Application Form – awards of up to £5,000

### **Privacy notice**

Your organisation's name, main contact person and website details will be made available to the public. We will keep other personal information that you give us confidentially.

We will only use it for the £EITH CHOOSES participatory budgeting initiative.

We will not pass it on to anyone.

Any information that you give us will be stored for 2 years and then destroyed. Thank you.

Ref no. (Office Use Only)

#### We need the following information to consider your application

Organisation name:		
Contact address and postcode:		
Main contact name & position:		
Telephone number:	Website address:	
Email address:		
Please summarise your organisation's main aims and activities. (maximum 50 words):		

#### Addressing inequalities – your project

The Leith Neighbourhood Partnership is inviting bids for funding for local community projects. The City of Edinburgh Council's Community Grants Fund is for small, one-off projects that meet urgent needs and progress local priorities. Learn more at http://edinburghnp.org.uk.

Your project must fit clearly with 'addressing inequalities', and be submitted under one of the following themes:

- **Food:** preventing and/or mitigating hunger; growing, cooking, educating about food; providing or distributing food to people suffering from food inequality; education and/or support of people affected by alcohol issues
- **Supporting vulnerable people:** children, older people, disabled people, homeless people, vulnerable families/single parents, refugees, domestic abuse victims, isolated minorities etc

Please describe briefly the needs you aim to address:

Please tick which of the to select the one you w	e two themes above your project reflects. (Your project may cover both themes but you will need ish to enter under.)
Food	Supporting vulnerable people
	or project in 100 words at most. Tell us what activities will take place, how the grant money will expected outcomes are. Please say who will benefit from your project.
	this description exactly when presenting your project information online for voters to read. how clear your project description is will affect whether or not voters understand your project
Where will your propos	ed project be based?
What postcodes are cov	vered by your proposed project?
Projects must be comp dates:	oleted within twelve months, i.e. by March 2020. Please state your proposed start and finish
Start date	Finish date
Equality and diversi	ty
•	s will you make to involve and benefit people from minority groups, particularly (but not prity groups/communities?
You will be required to	specifically document this.
How many people (roug	ghly) from the Leith area will benefit from your proposal altogether?
What proportion of the	se (approximately) will be from ethnic minority communities?
What other minority gro	oups will you include/target?
	al meet the needs of these groups: people with disabilities; faith communities, older people; r transgender (LGBT) people?

## Partnership working Have you consulted colleagues and/or other partners in relation to your proposal? If so, who? Are other organisations involved in your proposal? If so, which? Have you obtained consents, permissions or insurance necessary to carry out your proposal? (We may ask you to provide evidence of this.) ves $\square$ no 🗆 not yet $\square$ not necessary Constitution and accounts Does your organisation have a constitution? (Please note that only constituted organisations or groups under the banner of a constituted organisation may apply for £EITH CHOOSES 2018-2019 funds.) no 🗆 yes □ Please enclose the following documents with this application: Constitution, or Memorandum and Articles of Association, Trust Deeds of your organisation Most recent annual (audited) accounts. Where your organisation is newly constituted, a most recent bank statement will suffice. Quotations (for equipment / machinery, services costing over £300) **Bank Account** Please give the details of the bank account this grant would be paid into if successful. This should be the same as your organisation's name. Name of bank: Bank address: Account name:

If you have any problems completing this form, please contact Caroline Lamond: phone 0131 469 3507, email caroline.lamond@edinburgh.gov.uk.

Bank sort code:

Account number:

#### **Project financial information**

•		
Project costs		
Please list each item of expenditure for this project, showing how calculated, and enclose estimates or other evidence of costs, including <i>in kind</i> .  If there is a specific element(s) of this you are requesting from £EITH CHOOSES, please state this clearly.		
Total expenditure		
Project income		
If your project costs more than requested from us, please list the source of any match funding or in-kind funding for this project, or if income from charges is anticipated. Please show evidence that such funding is secured and that you can complete the project.		
Total income from other sources:		
Amount requested from £EITH CHOOSES:		
Declaration		
Your application must be signed by two recognised representatives of your organisation.		
You are being asked to <b>declare</b> that:		
G		
You have read and will comply with all funding conditions	s;	

• To the best of your knowledge, that the information contained in this application and any accompanying attachments is accurate.

Signature	Signature
Name	Name
Date	Date
Position	Position

Please send this completed form to:

Caroline Lamond

East Neighbourhood Centre

101 Niddrie Mains Road

Edinburgh

EH16 4DS

email caroline.lamond@edinburgh.gov.uk

### Remember to include/send

- a copy of your group's constitution
- details of your group's bank account
- quotes for any items to be bought that cost £300 or more
- a good quality .jpg or .png image: your group's logo,
   a relevant photo or however you wish your project to be represented visually.