

Deal Town Council Grants Programme 2020-21

Appendix 3a COMMUNITY CONTRIBUTIONS Application Form

Please add any additional information you want to give us on a separate sheet.

1. Your Organisation		
Name of organisation		
Contact name and position in organisation	NAME: POSITION:	
Contact details	ADDRESS: TEL: EMAIL:	
Registered charity / CIO	YES/NO:	Charity No:
Co. Ltd by Guarantee or CIC	YES/NO:	Company No:
Community Group, Club or Association	YES/NO:	Details:
Other	YES/NO:	Details:
Have you received a grant within the last 3 years from Deal Town Council?		YES/NO:
If YES please provide information	Year	Amount

2. Your Project	
<p>Please give the AIMS AND OBJECTIVES OF THE ORGANISATION</p> <p>How does your organisation contribute to the community of Deal?</p>	
<p>Why do you need a COMMUNITY CONTRIBUTIONS grant?</p>	
<p>Does your organisation meet the needs of all residents of Deal town? If not, who are your beneficiaries? Include age, gender, special characteristics.</p>	
<p>Does your activity benefit people outside the Deal Town area?</p>	<p>See https://maps.dover.gov.uk/webapps/Wards/</p> <p>YES/NO:</p>
<p>If yes, what proportion of your beneficiaries live in Deal town?</p>	<p>.....%</p>
<p>Over what period would you want to receive the grant?</p>	<p>1 year: YES / NO 2 years: YES / NO</p> <p>other</p>

3. Financial Details	Item	£
Explain what a Deal Town Council grant would be used for, if awarded.		
	Total cash cost	£
Please list any other 'in kind' contributions and value in £.		
Please give details of other funding applied for but not yet secured	Funding applied from	
		£
		£
		£
Please give details of other funding already secured	Funding received from	
		£
		£
		£
Please give details of volunteer hours which should be taken into consideration.		
Please give details of any cash contribution from your organisation		£
How much grant are you requesting from Deal Town Council?		£

4. Checklist: Have you provided	Yes/No	If 'No', give the reason
A fully completed application form signed and dated		
A copy of your governing document e.g. constitution, set of rules etc. <i>If supplied within last 3 years please contact the R.F.O</i>		
A copy of your latest bank or building society statement		
A copy of your latest completed accounts and annual report if it exists		

Grant Conditions

- i. The grant can only be used for the purpose stated in the application. Deal Town Council reserves the right to reclaim any grant not being used for the specified project/activity.*
- ii. Should the organisation disband or the project cease during the grant period Deal Town Council may ask for all or part of the grant to be paid back.*
- iii. Organisations are responsible for ensuring that they comply with all legal and statutory requirements.*
- iv. To be eligible for a grant an organisation shall not discriminate on the grounds of racial origin, gender, disability, age (except for obvious reasons, such as becoming a member of a youth club), and political or religious persuasion*
- v. Acknowledgment of the grant received from Deal Town Council is required on documentation, on promotional literature, websites and on social media. The Deal Town Council logo will be supplied on request for this purpose.*
- vi. Deal Town Council will monitor the use of the grant through the Grant Monitoring Form. No further applications will be accepted if there is an outstanding Grant Monitoring Form.*
- vii. Organisations must contact Deal Town Council before disposing of any equipment or resources purchased or part purchased with Deal own Council grant within 3 years of receiving a grant.*
- viii. Should any of these conditions not be met it could result in the award being withdrawn, the grant having to be repaid and future grant applications being refused.*

5. Declaration.

I declare that the information given is correct

I have read and agree to adhere to the conditions of the Grant Programme.

Signed

Date

<i>Payee for grant payment (if an individual's name please explain why)</i>	<i>Name:</i>
	<i>BANK Details:</i>

Completed forms must be returned to the Responsible Finance Officer, Deal Town Council, Town Hall, High Street, Deal, Kent CT14 6TR. Any enquiries or assistance required in completing this form should be made to the Responsible Finance Officer. Tel: 01304 361999 or e-mail: paul.bone@deal.gov.uk .

The declaration at the end of the application form must be signed and dated, forms sent in electronically require either a scanned copy of the final page with signature or a final signed page to be submitted by post.

All applicants will be advised that their form is being processed within 10 working days of receipt.

For Town Hall use only.	
Date application received	
Form checked by	
Date application validated by R.F.O.	
Date of committee meetings when application will be considered	
Decision	
Date applicant notified of decision	

Appendix 3b

COMMUNITY CONTRIBUTIONS Monitoring Form

Under the grant conditions you are required to submit an end of grant report on what Deal Town Council's funding has been used for, with a breakdown of all the income you received for the project, and all the expenditure incurred.

The grant monitoring form must be submitted to the R.F.O. **within three months of the project completion date.**

The declaration at the end of form must be signed and dated.

1. Your Organisation	
Name of organisation:	
2. Your Grant	
Grant Amount	£
Proposed start and finish date	START: FINISH:
Actual START and FINISH dates	START: FINISH:
3. Outputs	
Describe how the residents of Deal benefited from the grant. Include number of beneficiaries . You may like to send in your annual report too.	
Please say whether the impact was as you expected. Please feel free to tell us honestly about the any failures as well as successes.	
Acknowledging your grant: Please send us evidence of where the Deal Town Council logo was included in your reports, posts, promotional materials etc.	

4. Financial Details	Item	£
Please give the FULL final cost of your project. Continue on a separate sheet if necessary		
	Total cash cost	£
Volunteer Hours		
Other IN KIND value		£

5. Declaration.

I declare that the information given is correct

Signed **Date**

Completed forms must be returned to the Responsible Finance Officer, Deal Town Council, Town Hall, High Street, Deal, Kent. CT14 6TR.

For assistance in completing this form please contact the Responsible Finance Officer– Tel: 01304 361999 or e-mail: paul.bone@deal.gov.uk

For Town Hall use only.	
Date received:	Checked by:

Appendix 3c

See below the **COMMUNITY CONTRIBUTIONS** score sheet **for applicants' information only**

Deal Town Council Community Contributions SCORE SHEET			
Organisation			
Please score on 1-5 scale (1=weak 5=excellent) PLUS up to 3 Bonus Points if appropriate)			
Criteria	Score 1-5	Bonus	Comment
1. How well does the organisation contribute to the community?			
2. Is the need for the grant clearly demonstrated?			
3. Is it local? Will it affect entirely or predominantly Deal residents?			
4. Impact – will it affect a wide range or number of people? Will it have a major impact on a limited number?			
5. Is the budget reasonable? Have costs been properly explored?			
6. Is there a suitable level of match funding and/or volunteer time?			

POINTS OUT OF **33**

Signature:.....

Date:

Chair of Grants Committee