

## Partnership Fund Grant Application Form 2019

### Declaration

I have read and understood the Guidance Notes	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
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Name:

Signature:

### Contact information

Name of organisation:	
Name of correspondence contact: *	
E-mail: *	
Telephone: *	
Address for correspondence: *	

**\*If at any time these details change it is your responsibility to notify us**

### Grant application information

Amount requested (up to £5,000)	£
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Please explain in no more than 500 words, how the local need has been identified, and provide evidence of this.

How many Elmbridge residents do you currently support?	
How many people do you expect to support with this funding?	
If your service operates outside of Elmbridge, what is the % of Elmbridge clients?	
What are the expected outcomes from the project and how will you measure them?	
Please explain how the funding will contribute to any of the following: <ul style="list-style-type: none"><li>• building and developing capacity</li><li>• building sustainability of the organisation.</li><li>• service innovation</li></ul>	

Total anticipated project or activity cost:	(£)			
Cost contribution to be made by your organisation:	(£)			
Project timescale- when do you expect to start and complete this activity?				
Would you accept less funding than you have applied for if it was offered?				
Do you have an appropriate Safeguarding Policy?	Yes		No	

What are the Aims and Objectives of your organisation

Type/legal status of your organisation	Registered Number
Registered Charity	
Company Limited by Guarantee	
Community Interest Company	
Voluntary Organisation	
Other (please provide details)	

- If you are a grass roots or community organisation, i.e. a small volunteer led group, we would expect that you have a constitution and a bank account in the name of your group, or that funds awarded are held and administered by Central Surrey Voluntary Action.

If your organisation has applied for funding for this project from other sources indicate:			
Which other funding bodies have been applied to:	Amount requested:	Amount received or agreed:	
Bank Details (will only be used if application is successful)			
Account Name:			
Account No.:		Sort Code:	

Checklist of supplementary information – please ensure information is attached				
Mandatory: audited or draft accounts for the last full financial year.	Yes		No	
Mandatory: copies of the most recent statements of current and / or investment account balances.	Yes		No	
Mandatory: Copy of Safeguarding Policy	Yes		No	

**Declaration** – I certify that the information provided on this application form is correct to best of my knowledge. I agree, if the Partnership allocates our organisation a grant, we will comply with the grant conditions and monitoring requirements attached to the payment. I understand that failure to provide adequate monitoring information will result in the Partnership organisations requesting the reason why the monitoring is late with the potential of some of the funding being returned. I understand that this funding is for expenditure during the 12 month period following the award of the grant.

**Signature** - for online scanned signatures, the Partnership reserves the right to request a hard copy signature at a later date.

Signed:		Date:	
Position within the organisation:			

### The General Data Protection Regulation (GDPR)

The Council's policy is to retain applications and all associated documents for a period of 7 years in the event of any enquiry. This application may contain personal information e.g. names, addresses, emails and therefore as part of the GDPR the Council is obliged to inform you of such a policy and the reason for the retention. This information will also be shared with the Partner Charities.