

**Inverclyde’s Warm Hand of Friendship**

**Grant Application Form**

Use this form to apply for funding from the Inverclyde’s Warm Hand of Friendship Grant Fund funded by Inverclyde Council.

All grants will need to respond to the following priority:

***Supporting the Inverclyde Community with the cost of living over winter 2024/25, in particular in relation to keeping warm and extending the “Warm Hand of Friendship”, through additional activities.***

Further information can be found on the guidance document. **Please read the full guidance document before filling in the application form.**

Complete the whole application and answer all the questions. Incomplete applications will not be considered. All applicants, whether successful or not, will be notified of the outcome of their application.

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| 1. **Contact Details**
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| 1. **Name**
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| 1. **Position**
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| 1. **Address**
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| 1. **Email**
 |  |
| 1. **Phone number**
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| 1. **Website or social media address if you have one**
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| 1. **Organisation Details**
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| 1. **Name of organisation**
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| 1. **Type of organisation**
 | [ ]  Registered charity[ ]  Company limited by guarantee[ ]  Unincorporated club or association[ ]  Scottish charitable incorporated organisation (SCIO)[ ]  Community interest company [ ]  Other (please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Please provide your bank account details:**
 |  |
| **Account name** |  |
| **Bank name**  |  |
| **Bank address** |  |
| **Sort code** |  |
| **Account number** |  |
| 1. **Brief description of your organisation’s main activities and services (no more than 50 words)**
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| 1. **Grant Activities**
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| 1. **Provide an estimate of the number of people who will be supported through the grant**
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| 1. **Project delivery timescale (funding must be spent by March 2025). Please put a start and end date**
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| 1. **Please provide a description of the activities you are seeking funding for (Maximum 300 words)**
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| To help us to review your application consider the following points:* What you will spend the grant on and in what location(s) in Inverclyde.
* Describe your beneficiaries (people you support) and estimate the number of people who will be supported.
* Demonstrate that the activities are additional and meet the priorities of the Fund.
* Outcomes you hope to achieve.
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| 1. **Any additional information you would like to provide as part of your application (Maximum 100 words)**
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| 1. **Budget**

**Please complete the budget below, estimating the amount of money that you intend to spend on each item (please add further rows if necessary). Please note that the maximum grant is £3000.** (Provide short description of cost eg, staff costs, venue costs, travel and subsistence, small equipment, etc) |
| **Item** | **Amount** |
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| **Total Grant Requested** | **£** |

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| 1. **Signature**

**I confirm that the information given on this form is accurate to the best of my knowledge. Furthermore, I hereby confirm that the grant will not be used for any other purpose than stated above.****In accepting any grant awarded, you agree to:*** **Include the ‘Inverclyde Warm Hand of Friendship’ brand on all publicity material**
* **upload information on the event to the Inverclyde Life website**
* **provide space for council officers to attend the warm space and undertake community engagement**

**I acknowledge that on completion of the project, a grant report and evidence of spend will be required for evaluation purposes.** |
| Signed |  |
| Date |  |

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| 1. **Other Information**

**This application must be accompanied by the following supporting information:** * A copy of your most recent set of audited or independently examined accounts or, if you are a new organisation, a record of income and expenditure, dated and signed as approved and a copy of your most recent bank statement.
* A copy of your organisation’s constitution, or other governing documents, dated and signed as approved and records of the last 3 meetings of your governing committee/board.
* For organisations working with vulnerable adults, children and young people under 16 years of age only, you are required to provide the Council with information about the steps taken by your organisation to ensure the appropriate PVG procedures are in place.
* A copy of your Public Liability Insurance.
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The information you provide will be held electronically. It will only be used to enable a decision to be made about whether a grant to your group should be approved. We might give copies of all or some of this information to individuals and organisations we consult when assessing applications, administering the programme, monitoring grants and evaluating funding processes and impacts. We might use data you provide for research purposes. We recognise the need to maintain the confidentiality of vulnerable groups and your details will not be made public in any way, except as required by law. Individual recipients of the grants/programmes will not be identified but the organisations in receipt of funding may be.

Applications submitted by the initial closing date of 31st October 2024 have been assessed and payments released to successful applicants. Any further applications received will be reviewed early in the new year.

Any queries should be directed to Jackie.fallon@inverclyde.gov.uk,Telephone: 01475 715450, Mobile: 07881 280026.

**Completed application forms should be sent:**

**By E-mail:** Attaching all required documents send to:Jackie.fallon@inverclyde.gov.uk

**By handing it in to the Customer Service Centre:**

Municipal Buildings, Clyde Square, GREENOCK PA15 1LY

Please mark envelope:

FAO Jackie Fallon, Communities Service, Enterprise Centre, Port Glasgow Community Campus

**By Post (Please ensure correct postage):**

FAO Jackie Fallon

Communities Service

Enterprise Centre

Port Glasgow Community Campus

Kilmacolm Road

PORT GLASGOW

PA14 6PP