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| **Sheffield City Council****Community Fund 2021/22**G:\NBH\FoCH\Phase 3 Future of Council Housing\Community Fund\Communications Work\25.162 FINAL fund logo-outlines-small file.jpg**Grant Monitoring Form** |

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| **Please return within a month of the end of your activity**  |

1. Please give the name of your organisation as it appeared on your payment letter:

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Please tell us the main contact for this monitoring form:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title: |  | First Name: |  | Surname: |  |

|  |  |
| --- | --- |
| Position heldwithin organisation:  |  |

|  |  |
| --- | --- |
| Daytime phone no: |  |

|  |  |
| --- | --- |
| Email address: |  |

Full postal address where we should write to you about this monitoring form if you do not have an email address:

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| 2. | How much was your grant? **Do check your payment letter:** |  |

Please give a breakdown of how you spent the grant. You will need to send us a **receipt** for any **items of capital expenditure over £100**. You must keep receipts for all other items of expenditure but you do not need to send them to us: **See Community Fund Signature and Grant Conditions Form – paragraph 8.**

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| --- | --- | --- |
| **Description of item(s) the grant was spent on** | **Amount £** | **Receipt enclosed Y/N** |
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| **Total grant expenditure** | **£** |  |

3. If you did not spend all of your grant, you can either return what is left, or ask to spend it on something else of benefit to your community. Please note, if you spend part of the grant on something other than what it was given for, without seeking approval, we may ask for the money to be returned. Please make your request or tell us your decision below:

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| 4. | When did your activities take place? | Start date: |   |
|  |  | End date: |  |

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| 5. | How many people benefitted from this grant? |  |

6. Was the activity targeted to engage any of the following groups of people (tick ✓ as many boxes that apply)

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| --- | --- | --- | --- | --- |
| BME people |  |  | Gay, lesbian, bisexual or transgender people  |  |
| People over 60 |  |  | Children or young people under 19 |  |
| Women |  |  | Disabled people or people with a limiting long term illness |  |
| Men |  |  | A particular faith group |  |

 How successful was the activity in engaging the group(s) you have indicated:

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7. How successful was the activity we funded? Please rate it on the scale below by ticking ✓ the most appropriate box:

|  |  |
| --- | --- |
| The activity wasn’t as successful as we’d hoped |  |
| The activity went well |  |
| The activity was even more successful than we’d hoped |  |

 If the activity didn’t go as well as planned, why do you think this was?

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| 8. | Will the service / activity continue? Please tick ✓ | Yes |  |  | No |  |

9. Please tell us how your users benefitted?

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|  |

10. We want our grant process to be as user friendly as possible and value your comments. Please tell us below what went well for you and what we can do to improve our service:

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 **Declaration**

 **I confirm that the information provided above is a fair and accurate record of our organisation’s use of the Community Fund.**

|  |  |
| --- | --- |
| Name: | Date: |
| Position in organisation: |

 **Email:** Please scan signature and return to: communityfund@sheffield.gov.uk