

Serving your Community Since 1894

Ward Based Grant Application Form

Please ensure that <u>all</u> the details requested on the following pages are completed in full. <u>Please note that the Parish Council will be unable to process your application if any of the required information has been omitted.</u>

Applicants may be required to provide proof of expenditure of any previous grant by providing invoices, receipts etc. before a new application may be considered.

Please submit this form completed within one month of receiving it.

| 1 | What is your group called? Give your name as it appears on your bank account. | | | | | |
|---|---|--------------------|---------|---------|--|--|
| | 14th Sheffield (Grenoside) Scout Group | | | | | |
| 2 | Please give us your contact details. | | | | | |
| | Title Mr First name | Daniel | Surname | Hopkins | | |
| | Position in group (if applicable) | Group Scout Leader | | | | |
| | Address. | | | | | |
| | | | | | | |
| | | | | | | |
| | Your phone number, if we i | need to talk to yo | ou. | | | |

| 3. Full address of who | ere your activit | ies will be based. |
|---|-------------------------------------|---|
| Grenoside Scout a Saltbox Lane Grenoside S35 8Q | | |
| 4. Which Ward will the more than one): | ne project cove | er? Please tick the appropriate box (you may tick |
| Burncross | | |
| Chapeltown | | |
| Ecclesfield | | |
| High Green | | |
| Thorncliffe | | |
| Grenoside | Yes | |
| | tively engage a | and support young people in their personal make a positive contribution to society. |
| | | |
| 6 . What activity will yo when will this take pla | | oject will you undertake if we give you a grant and |
| money for the extens After covid lockdowns | ion to our HQ l s and restrictio | or fund raising efforts have been directed to raising building, leaving none spare for our activities. In swe've bounced back with more members than and extra tents for our members. |
| | | |

Your email address, if you have one

| 7. | Does your group re | eceive funding | from a | anywhere | else? | Please | state | who | this | is |
|-----|--------------------|----------------|--------|----------|-------|--------|-------|-----|------|----|
| fro | m and the amount | of funding | | | | | | | | |

| Self funded | | |
|-------------|---|--|
| | | |
| | | |
| | | |
| | , | |

8. Please give us a breakdown of what you want the funding to pay for :-

| Item requested | £ per item/activity | Total |
|--|---------------------|----------|
| Decathlon Arpenaz 4.1 4-man tents x 10 | £ 119.9 | £1199.90 |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| | £ | £ |
| Total cost of activity | | £1199.90 |
| Total cost of grant requested from us | | £1199.90 |

9. You must provide a copy of your latest financial accounts together with a copy bank statement.

| 10. Ple | | the people who are a | authorised to | make v | vithdrawals | from your | |
|-----------------------|----------------------------|---|------------------------------|-----------|-------------|----------------|---|
| Name | | Meretine_ | Name | | | <u> </u> | |
| Name | Lacime | | Name | ű. | A CHICAGO | | |
| | | eople have to sign for | | | | 2` | |
| | | etails of your bank ac use give details of wh | | | | | |
| | × | • | | | | | |
| Please i | note that ter related | phic evidence is prophic evidence is prophic evidence is prophic evidence is prophic evidence is probably be publicent cannot be consider | s subject to eans that me | e event | m of Inform | nation Act 200 | |
| Decl | aratio | n of intent | | | | , | - |
| This appl | ication nee t the begin | eds to be signed by the | ne person wh | ose nar | ne appears | as the | |
| I can cor authoris | nfirm that ed me to r | the organisation na nake this applicatio | med on the n. | front of | this form I | าลร | |
| | | all the answers to th | | s are tru | ıe. | | |
| Name | | Daniel Hopkins | | | | | |
| Position i | n group | Group Scout Leader | | | | | |
| Signed | | | | Date | | | |

The Parish Council has been advised to request a short questionnaire on any risks there may be in respect of applications for financial assistance. Therefore in order to be satisfied that there will be no legal implications for the council if they do give a grant in response to your request, I would be pleased if you could kindly reply to the following few points.

| | JESTIONS | TICK BOX OR ANSWER |
|----|--|--|
| 1. | Does the applicant/your group have adequate public liability insurance in the Group's name to a minimum of at least £2 million cover for any activities etc. which may benefit from the council's grant. Please supply us with a copy of your certificate along with your application. | Yes |
| 2. | Is the premium paid up to date (give date) | Yes |
| 3. | Have police checks (CRB disclosure) been carried out for group members who deal with children and vulnerable adults | Yes |
| 4. | What steps have been taken to minimise any accidents, loss or damage to property or people or property. | All property is kept in secure storage |
| 5. | Will the grant be repaid to the Parish Council if the event does not take place or the items that the grant is requested for are not purchased? | Yes |
| 6. | Will the lack of a grant stop the event taking place or seriously curtail or reduce the activities of the group in any way | Yes |
| 7. | Has the health and safety of members of the group or the public participating in an event been properly assessed and have satisfactory conclusions been drawn from this assessment | Yes |
| | Are you satisfied that all possible risks have been adequately covered by the systems and procedures you have placed in force for the event or for the use of the equipment purchased from the grant | Yes |

| Signed by Chairman | Date | |
|---------------------|------|--|
| | | |
| Signed by Secretary | Date | |