

Market Street Crediton Devon EX17 2BN Telephone: 01363 773717 Email: townclerk@crediton.gov.uk

Grant Aid Application Form 2016 – 17

The information provided on this form will be treated as confidential and used for grant assessment purposes only. Where the application is successful the Council may, from time to time, wish to process this information (as updated) for administration purposes. Where this happens, processing, whether by computer or otherwise, will take place in accordance with the Data Protection Act. By signing this form, you will be providing the Council with your consent to these uses.

►Name of Organisation:

►Contact Details:

Title (Mr/Mrs/Miss/Ms/Other)

First Names

Last Name

Position in Organisation

Address

Postcode

Telephone Number

Email Address

Are you or any members of your organisation related to any elected member or employee of the Council? If so, please give details.

▶ Purpose/Aims of Organisation:

Size of Organisation/Number of Members:



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▶ Purpose for which the Grant is required: Please include details on who will benefit from the project or scheme requiring funding.

► Total cost of the project or scheme requiring funding:

► Amount of Grant applied for:

►Annual Budget: Please include details on any anticipated income (including grants applied for and sources of other funding) and any proposed expenditure. Please attach a copy of the organisation's most recent set of accounts or business plan if available.

►Account of Activities over the Previous Year:



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►Account of Plans for Forthcoming Year:
▶ Previous Applications: Please provide details of any previous financial assistance provided by the
Council to include dates, details of any schemes or projects and the amount received from the
Council.

► Does your service/project involve work with children, young people under the age of 18 or vulnerable adults?

Yes 🖬 No 🗖

If yes, as a minimum we expect you to:

- have safeguarding policies in place that are appropriate to your organisation's work and the project you are asking us to fund
- review your safeguarding policies at least every year
- complete a rigorous recruitment and selection process for staff and volunteers who work with children, young people or vulnerable adults, including checking criminal records and taking up references
- check criminal records at least every three years
- follow statutory or best practice guidance on appropriate ratios of staff or volunteers to children, young people or vulnerable adults
- provide child protection and health and safety training or guidance for staff and volunteers
- carry out a risk assessment, if appropriate
- secure extra insurance cover, if appropriate.

Does your organisation meet these requirements?	Yes		No 🛛
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►Additional	Information:	Please provide	any add	itional i	information	you	may	consider	relevant	or
helpful to th	e Council whe	n considering th	nis applica	ition.						

► Declaration:

I declare that to the best of my knowledge and belief, all particulars and information provided in this document are correct and complete.

I understand that any false declaration or misleading information or any significant omission may result in the rejection of the application or repayment of any grant aid subsequently provided.

Signed

Date

This form must be returned to Crediton Town Council, Council Offices, Market Street, Crediton, Devon, EX17 2BN, no later than Wednesday, 30th September 2015.

Your application <u>must</u> be accompanied by a copy of your most recent published financial accounts.

Grant Aid applications for the financial year 2016/2017 will be payable in April/May 2016.