

In partnership with 

**SMALL GRANT SCHEME - SUPPORTING UASC YOUNG PEOPLE AND THEIR COMMUNITIES APPLICATION FORM**

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**Section 1 – Before Applying**

1. Please confirm that you have spoken to the Project Coordinators from Amity Hub (01782 612539, email [contact@amityhub.co.uk](mailto:contact@amityhub.co.uk)).

Yes/No - delete as applicable

1. Please confirm that you have read the detailed guidance on the UASC Supporting Young People and their Communities Fund (available at <https://www.amityhub.com>)

Yes/No - delete as applicable

**Section 2 – Organisation**

|  |  |
| --- | --- |
| Name of Organisation : |  |
| Charity Number (if applicable) : |  |
| Main Address  Include postcode |  |
| Address for correspondence if different from above  Include postcode |  |
| Contact Name : |  |
| Position in organisation : |  |
| Contact Telephone Number : |  |
| Contact Email Address : |  |

**Section 3 - What Type of Organisation are you? Please tick the appropriate box.**

|  |  |
| --- | --- |
| Registered Charity |  |
| Charitable Incorporated Organisation |  |
| Charitable Unincorporated Organisation – See below\* |  |
| Company Limited by Guarantee |  |
| Community Interest Company Limited by Shares |  |
| Community Interest Company Limited by Guarantee |  |
| Other – Please describe : |  |

\* Please send us a copy of your governing constitution

**Section 4 – Your Project**

|  |  |
| --- | --- |
| Name of Project |  |
| Please describe your project. Please include details of the location where and how it will operate.  *Please attach a map which clearly shows the location of your project and where it operates.* |  |
| If you are working directly with young people and vulnerable adults what will be your safeguarding arrangements? – Do you have effective policies and practices?Please describe. |  |
| How will the project contribute to the delivery of the “Supporting UASC Young People” criteria for funding outlined in the guidance document ? |  |
| This small grant scheme is aimed at launching new activity or helping existing activity to expand to include UASC. How will your project use this funding to provide more than you already do ? |  |
| Evaluation - describe how the impact and success of the event or activity will be measured. |  |

**Section 5 – Cost of your Project ( Amount of grant applied for). Maximum £1000.**

List items/services

Please detail how the money you are applying for will be spent.

e.g. – a total of £1000 might be split as follows :

Room hire £185

Training Workshop £515

Equipment Costs £300

Indicate whether each item is an estimate or known amount.

|  |  |  |
| --- | --- | --- |
| Cost Description | Amount £ | Estimated or confirmed |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |

Important : Items should not be purchased before any grant has been approved. Projects are not funded retrospectively.

**Section 6 – Payment Arrangements**

If a grant is awarded, payment will be made on receipt of a valid invoice from your organisation.

|  |  |
| --- | --- |
| Name of Treasurer |  |
| Address of Treasurer |  |
| Contact Telephone Number |  |
| Email Address |  |
|  |  |
| **Bank or Building Society Details** |  |
| Name of Bank/ Building Society |  |
| Account Name |  |
| Account Number |  |
| Roll Number (Building Society accounts only) |  |
| Name of signatories to the account |  |

**Section 7 – Certification**

Please check your submission carefully, ensuring you have correctly added all items to your application.

**Section 8 - Data protection and General Data Protection Regulation (GDPR) 2018**

Information collected by Amity Hub may be shared with Staffordshire County Council. Where Staffordshire County Council collect any personal data from you as part of the application process, they will only use it for this purpose and no other. Your personal data will never be shared with anyone else other than Staffordshire County Council and will be retained only for as long as it is needed. Non-personal data you submit to use as part of this application process will be used to make decisions to award funding, perform anonymised analysis, or to undertake publicity or fundraising. For more information on how Staffordshire County Council handles personal data, please see their Privacy Notice.

**Section 9 - Declaration**

I certify that all the project and bank account details given are correct and that the proposed grant will be spent on that project.

I undertake on behalf of the recipient of the grant (the grantee), to fully comply with all conditions set out in the stipulations of the documentation that accompanies this form.

I am authorised by the grantee to complete and submit this document on the grantee’s behalf and the grantee will be legally bound by it.

I also confirm that :-

The project will proceed immediately on payment of the grant and we will apply for immediate payment by submitting a relevant invoice for the agreed amount.

Or

The project will not proceed until the xx/xx/xxxx (insert date) and that we will notify Amity Hub in writing when payment is required by submitting a relevant invoice for the agreed amount.

**Submission**

I have already discussed this application with Amity Hub’s Project Co-ordinators.

I have completed the form fully and correctly and accept the declarations above and I now wish to submit my application.

Signed ………………………………………… Date : xx/xx/xxxx

Print Name …………………………………….

Position in the organisation …………………………………….