For C	Office Use
ID REF	
Closing Date	18 th August 2014
Ward Area	
Date Received	
Scanned/PDF	
Supplier Code	

Wallasey Constituency Funding (2014/2015) Wallasey Bright Ideas Fund - Application Form

Please ensure you read the accompanying enclosed supporting information and terms and conditions before filling in your application

Please return your completed form to: Wallasey Constituency Team, Neighbourhoods & Engagement, Leasowe Millennium Centre, Twickenham Drive, Leasowe, Wirral CH46 1PQ.

Closing date for applications: 12 noon Monday 18th AUGUST 2014 (Applications that are incomplete, late or do not meet the criteria will not be considered)

If you have any questions please speak to Michelle Gray on 0151 666 4902 or e-mail michellegray@wirral.gov.uk

Secti	ion One: Tell us about your organisation/group:
Q1.	What is the name of your organisation / group?
Q2.	What does your organisation/group do?

Q3. What type of organisation/group are you?

Our organisation is:	Tick	I have enclosed <u>one</u> of the following:	Tick
Registered Charity		Charity Number (please state)	
Community Group		Constitution or Bank Statement	
Voluntary Group		Constitution or Bank Statement	
Faith Group		Constitution or Bank Statement or Charity Number (please state)	
A Social Enterprise/CIC		Copy of Certificate or Registered Number (please state)	
Other:			

you must enclose one of the above as evidence of your organisation status

Section Two: Tell us about	your Application	:		
Q4. Please tell us the na	me of your projec	t and in one sentence describe	your project?	
please note question 13 allows you to provide more detail Q5. Please tell us which ward/s your project benefits and how many people you anticipate will benefit if you are successful?				
Ward	Approx numbers benefiting	Other (wider community)	Approx numbers benefiting	
Leasowe & Moreton East		Residents outside constituency area		
Liscard		Other Community Groups		
Moreton West & Saughall Massie		Visitors to Wirral		
New Brighton		Other (please list below)		
Seacombe				
Wallasey				
All six wards (i.e. Wallasey Constituency)				
	mount that can be l	bid for priorities number 1,2 and 3 mber 4 is £????. (see Question o	8)	
Q7. What is the overall c	ost of your projec	ct? (Please note the total	£	

Q8.	Which specific n	eighbourhood	priority/p	priorities	does y	our pro	ject tackle?
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please see Terms and Conditions for definitions

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Priority number	Priority name insert new prior	ities and maximum bi	d amount	Please tick all that apply
1				шас арріу
2				
3				
4				
	will this be achieved (i.e. how ed above)?	will your project tack	le the prior	ity/priorities you
	ve you secured, applied for or he total cost of this project only?	_	•	r funding that is
	he total cost of this project only?	_	Is below): Status	•
towards t	he total cost of this project only?	(please include detai	Is below): Status	r funding that is
Amount	he total cost of this project only?	(please include detai	Is below): Status	•
Amount £ £ Q11. If the	he total cost of this project only?	Date applied for ou require additional acceive part of the fund	Status - (e.g. second	ured / pending)
Amount £ £ Q11. If the	Source of funding nis application is approved but y hey be secured? (e.g. you only re	Date applied for ou require additional acceive part of the fund	Status - (e.g. second	ured / pending)
Amount £ £ Q11. If the	Source of funding nis application is approved but y hey be secured? (e.g. you only re	Date applied for ou require additional acceive part of the fund	Status - (e.g. second	ured / pending)
Amount £ £ Q11. If the how will t	Source of funding nis application is approved but y hey be secured? (e.g. you only re	Date applied for ou require additional acceive part of the fund	Status - (e.g. second	ured / pending)
Amount £ £ Q11. If the how will t	Source of funding nis application is approved but y hey be secured? (e.g. you only re	Date applied for ou require additional acceive part of the fund	Status - (e.g. second	ured / pending)
Amount £ £ Q11. If the how will the please and Q12. Does	Source of funding nis application is approved but y hey be secured? (e.g. you only re	Date applied for ou require additional eceive part of the fund applicable") relevant public liab	Status - (e.g. sector) funds to defing requeste	ured / pending)

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 Q13. Please provide brief details (no more than 100 words) of what the funding is for, w you hope to achieve and who, in the local community, will benefit from this? please note, this section of your application may be made public 		

Q14. Will this project benefit any protected groups? Yes / No (If yes please tick below).

	Please tick		Please tick
Age		Marriage and Civil Partnership	
Disability		Religion and Belief	
Race		Sexual Orientation	
Gender		Gender Reassignment	

Q15. Please give a <u>FULL BREAKDOWN</u> of what the funding will be spent on and include estimates (where applicable) to support this. <u>(Failure to do so may result in your application form being ineligible).</u>

Item/Detail	Cost	Amount Requested
Example: Rent at £10 per hour	£10.00 x 4 = £40	£2080.00
for 4 hours per wk x 52wks		
Total	£40.00 per session	£2080.00

Item/Detail	Costs	Amount Requested
·	_	
Total	£	£

Sec	Section Three: The information we need to process your application:		
Q16	Name and role within organisation		
Day	ime telephone number and mobile		
E-m	ail		
Add	ress & Postcode for Correspondence		

Q17. Declarations

I confirm that:

- the organisation / project meets the criteria of the funding
- the organisation has the relevant public liability insurance / DBS checks and / or relevant policies in place in relation to the project

All of the information included in this application is correct and includes the following:

- all the relevant information for the project / organisation
- all the documents requested in the application form

I agree to comply with the fund's terms & conditions including:

- to complete the project by 15th October 2015;
- to seek authorisation in advance of any potential changes to the spend outlined in the original application;
- to submit a progress report and a full detailed breakdown of spend when requested;
- when project is completed, written financial records, including original receipts for all expenditure, is provided for applications of £300 or more;
- to return all or part of the funding if unable to meet the terms and conditions.

Main contact: Signature:	Date:
Full Name:	
Position in Group:	
Witnessed by (2 nd contact/with	ess):
Signature:	Date:
Full Name:	
Position in Group:	
Daytime telephone number	

If you return this form by e-mail (with a printed signature / without signature) you are deemed to have accepted the declarations detailed in Question 17.

Q18. Please give bank details for BACS payment:

Name of Bank/Building Society	**											
Address of Branch**												
Account Name**												
Bank Account Number**												
Bank Sort Code**			•					-				
Building Society Account Number**												
(** these details <u>must</u> be provided Bacs payments to building so statement or by contacting the I hereby authorise Wirral Council Authorised Signature	ociety savin building so	ngs acc ciety)	ounts,	, thes	se c	an b	e ok	otain	ed fr			
If you return this form by e-mail have authorised the payment into	•	_				_	, ,	•		eem	ed t	' O
Please note if you are a new gro Council to update their records for				•					form 1	for \	Virra	al
Q19. How did you find out abou	ıt this fundiı	ng?										
Q20. Does your group have a facebook page, twitter account or other social media account? If yes please list usernames below.						``	⁄ES		N	0		
Q21. Would you like to automat funding or any local initiatives to the Please select your choice:									ny ot	her		
Ticase <u>select</u> your choice.	YES	NO										
Please select your choice:	EMAIL	POST										

Application Checklist:

Wallasey Bright Ideas Fund - Application checklist

Before you return the application form please use the list below to ensure you have supplied all the information we need. <u>HAVE YOU</u>:

 Read the terms & conditions to confirm that your project meets the criteria/priorities for funding 	
Included any evidence of your organisation's status e.g. Bank Statement/VAT No, charity number etc. (only one item is required) (Q3)	
Checked that the total amount applied for (Q6) does not exceed the total cost of the project (Q7)	
Included a complete breakdown of spend and quotes for goods / services (Q15)	
Included your bank account details (Q18)	
Answered <u>ALL</u> of the questions on the application form	
Signed application form (Q17) and Signed (Authorised Signature for Wirral Council to use your Bank Account (Q18)	
Retained the terms and conditions for future reference	
 Returned your completed form including all supporting information by 12 noon on the closing date – Monday 18th August 2014 	

• Please note that <u>all</u> information must be sent with the completed application form by 12 noon on the Monday 18th August 2014