

Community Grants

Application form

How to apply for a grant

- Read the 'what we fund' section of the Community Grants Funding Criteria document
- Print clearly using block capitals
- Provide as much information as possible to support your application
- Ensure you have completed the relevant section:

Established organisations/groups/schemes should complete **Sections 1, 2 and 4.**

Newly formed organisations/groups/schemes should complete **Sections 1, 3 and 4.**

Section 1

To be completed by all organisations/groups/schemes

Contact Details

Name of group/organisation/scheme:

Contact name for this application:

Title: First Name:

Surname:

Position held in the group:

Contact Address

Postcode:

Telephone Number:

Email:

1 Is the organisation/group/scheme a voluntary/community/not-for-profit making organisation? *Please tick*

Yes **No**

2 What are the main objectives of the organisation/group/scheme?

3 Which areas of Wythenshawe does your project cover?

Baguley

Crossacres

Northern Moor

Sharston

Benchill

Moss Nook

Peel Hall

Woodhouse Park

Brooklands

Newall Green

Poundswick

Brownley Green

Northenden

Royal Oak

4 Please indicate the number of members in your organisation/group/scheme

5 Is the organisation registered with the Charity Commission? *Please tick*

Yes **No**

*If **yes**, give the registration number:*

6 Please provide a description of the project or activity for which you require grant funding

7 Will the project or activity positively contribute to Wythenshawe in any of the following ways?

Tick all that apply:

Empower your community
Build a sense of belonging
Improve appearance of physical environment
Improve safety of your neighbourhood
Strengthen your neighbourhood
Increase confidence and capacity
Build mutually supportive networks

Work with young people
Provide advice services
Contribute to raising levels of education
Improve the health of the local community
Increase employability of the local community
Reduce crime
Reduce anti-social behaviour

Other *Please state*

8 How will your project or activity benefit residents living in Wythenshawe?

9 What is the total cost of the project or activity you are planning?

£

10 How much grant funding are you requesting from Wythenshawe Community Housing Group?

£

- 11** Are you receiving income from any other sources for the project? If you are a new group please provide projected income. *Please tick*

Yes **No**

If yes, please provide details:

Source of funding	Amount
	£
	£
	£
	£
	£
	£
	£

- 12** Has your group done any fundraising of its own? If you are a new group how do you intend to fund raise?

	£
	£
	£
	£
	£
	£

- 13** Does your group charge membership or weekly fees, if Yes please indicate how much you raise per year? If you are a new group please provide projected membership fees.

	£
	£
	£
	£
	£
	£

- 14** What are your group's running costs? If you are a new group please provide projected running costs.

	£
	£
	£
	£
	£
	£
	£
	£
	£
	£

15 How do you intend to use the money you are applying for?

Please use the following table to provide a breakdown of how the money will be spent and where you are getting funding for that item/activity by putting a tick in either 'WCHG' or 'Other' column on the table below (Please attach a separate sheet if necessary).

16 How will you publicise the grant from Wythenshawe Community Housing Group?

17 Does your organisation have a nominated Chair, Secretary and Treasurer? *Please tick*

Yes No

*If **yes**, please provide their contact details*

Name	Position in Group	Address	Telephone

18 Do you, or any members of your group, work for Wythenshawe Community Housing Group or are you related to any member of staff or board member of Wythenshawe Community Housing Group?

Yes **No**

If you have a relative who works for the Group, please state their name and relationship to you

Name

Relationship

--	--

In the space below, please provide any further relevant detail that you feel maybe useful for the panel, when reviewing your application.

Section 2

To be completed by **ESTABLISHED** organisations/groups/schemes only.

- 1 How long has the organisation/group/scheme been in existence?

- 2 Does your organisation/group/scheme have a signed constitution/set of rules? *Please tick*

Yes **No**

*If **yes**, please enclose a signed copy with your application*

- 3 Has your organisation/group/scheme got its own bank account? *This information will not be shared with anyone else. Please tick*

Yes **No**

How many signatories are on the account?

Name of Bank

Address:

Bank Account

Sort Code

Account Number:

- 4 Has your organisation/group/scheme produced annual audited accounts? *Please tick*

Yes

*If **yes**, please enclose a copy of your most recent accounts*

Accounts
Enclosed

No

*If **No** please enclose either of the two options below:*

3 most recent bank statements
Enclosed

Breakdown of income and expenditure
Enclosed

Section 3

To be completed by **NEW** organisations/groups/schemes only.

1 Please give details of other financial assistance given to the organisation.

2 How long has the organisation/group/scheme been in existence?

3 Please give details of why you feel there is a need for your organisation/group/scheme to be established.

4 If you already have a bank account please complete this question:

How many signatories are on the account?

Name of Bank	Account Number	Branch Name	Branch Address	Branch City	Branch State	Branch Zip	Branch Phone	Branch Fax	Branch Email	Branch Website	Branch Hours	Branch Services	Branch Notes
Bank of America	1234567890123456	Main Branch	123 Main St	New York	NY	10001	(212) 555-1234	(212) 555-5678	info@bankofamerica.com	www.bankofamerica.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Wells Fargo	9876543210987654	Downtown Branch	456 Market St	San Francisco	CA	94102	(415) 555-9876	(415) 555-4321	info@wellsfargo.com	www.wellsfargo.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Chase Bank	5678901234567890	Financial District	789 Wall St	New York	NY	10005	(212) 555-5678	(212) 555-0123	info@chase.com	www.chase.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Citigroup	2345678901234567	Midtown Branch	101 E 42nd St	New York	NY	10017	(212) 555-2345	(212) 555-6789	info@citigroup.com	www.citigroup.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
PNC Financial	3456789012345678	Liberty Branch	123 Liberty St	Philadelphia	PA	19102	(215) 555-3456	(215) 555-7890	info@pnc.com	www.pnc.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
TD Bank	4567890123456789	Financial Center	456 Financial Center	Boston	MA	02109	(617) 555-4567	(617) 555-8901	info@tdbank.com	www.tdbank.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Bank of Montreal	5678901234567890	Bay Street Branch	123 Bay St	Toronto	ON	M5H 2Y4	(416) 555-5678	(416) 555-9012	info@bmo.com	www.bmo.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Bank of Nova Scotia	6789012345678901	Waterfront Branch	456 Waterfront	Vancouver	BC	V6C 3E8	(604) 555-6789	(604) 555-0123	info@scotiabank.com	www.scotiabank.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Bank of the West	7890123456789012	Financial District	123 Financial District	San Francisco	CA	94102	(415) 555-7890	(415) 555-4321	info@bankofthewest.com	www.bankofthewest.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Bank of the South	8901234567890123	Financial Center	456 Financial Center	Atlanta	GA	30303	(404) 555-8901	(404) 555-2345	info@bankofthesouth.com	www.bankofthesouth.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
Bank of the Midwest	9012345678901234	Financial District	123 Financial District	Chicago	IL	60601	(312) 555-9012	(312) 555-6789	info@bankofthemidwest.com	www.bankofthemidwest.com	Mon-Fri 9am-5pm	ATM, Drive Thru, Online	
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Address:

Bank Account Name

Sort Code - - Account Number:

Section 4

We require two signatories from people authorised to sign on behalf of your group:

We confirm that the information in this application is correct, and any information found to be false or misleading will lead to any grant offer being withdrawn. We understand that you may ask for further information at any stage of the application process.

Name in block capitals	Date
Position in Group	Signature
Name in block capitals	Date
Position in Group	Signature

References will be required before this grant is approved. Please give the names of two people who know you and your group. All information received will be held in the strictest of confidence.

It could be a local teacher, community or youth worker etc. Unfortunately it cannot be a member of staff at Wythenshawe Community Housing Group (including Board Members). Referee(s) can also not be a member of the Community Grants Panel.

Ref 1.

First Name	
Surname	
Contact Address	
Postcode	
Telephone Number	
Email Address	

Ref 2.

First Name	
Surname	
Contact Address	
Postcode	
Telephone Number	
Email Address	

Submitting Your Application

To submit your completed application please make sure you have completed all relevant questions and return to:

Resident Involvement Team
Wythenshawe Community Housing Group
Wythenshawe House
8 Poundswick Lane
Manchester
M22 9TA

0161 946 6315

getinvolved@wchg.org.uk

