SPURNESS community fund application form (£250 TO £10,000)

Please read the guidance before completing this form. All sections must be completed and returned to

<david.shearer@sse.com>. If extra space is required, a separate A4 document may be attached.

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| **Section 1:** About your organisation | | | | | | | | | | | | |
| Name of organisation | |  | | | | | | | | | | |
| Contact name | |  | | | | | | | | | | |
| Position in organisation | |  | | | | | | | | | | |
| Website | |  | | | | | | | | | | |
| Email address | |  | | | | | | | | | | |
| Telephone | | Daytime  Alternative | | | | | | | | | | |
| Correspondence address (including postcode) | |  | | | | | | | | | | |
| Please provide some background information on your organisation, when it was set up and describe its main activities including any previous community projects you have carried out.  Suggested word limit 150 words | |  | | | | | | | | | | |
| Where does your organisation work? | |  | | | | | | | | | | |
| Which organisations (if any) provide a similar service locally? | |  | | | | | | | | | | |
| If applicable, what’s your charity number? | |  | | | | | | | | | | |
| Does your organisation require membership? | |  | | | | | | | | | | |
| How many members does your management committee have? | How many regular volunteers do you have? | | | How many full-time staff do you employ? | | | How many part-time staff do you employ? | | | How many members does your organisation have? | | |
|  |  | | |  | | |  | | |  | | |
| **Section 2:** Financial information | | | | | | | | | | | | |
| What’s your organisation’s main source of income? | | | | | |  | | | | | | |
| Total income  last accounting year?  (New groups: projected income in first year) | | | | | | Total Surplus/Deficit last accounting year? | | Current  unrestricted reserves | | | | |
| £ | | | | | | £ | | £ | | | | |
| Why can’t your reserves be used for this project? | | | | | |  | | | | | | |
| Have you applied to the fund before? If yes, please give details. | | | | | |  | | | | | | |
| **Section 3:** Grant application | | | | | | | | | | | | |
| Please provide a 25-word summary of the project you wish to be funded. | | | | | |  | | | | | | |
| Please describe the project you are looking for SSE Renewables to fund e.g.  What do you want to do?  How will you do this? (activities you will deliver, equipment needed, how it will be used)  Where will the project take place?  Who will lead the project?  Suggested word limit – 400 words | | | | | |  | | | | | | |
| How will you maintain/ sustain your project after the period of funding is finished? | | | | | |  | | | | | | |
| How many people will benefit from the project? Please tell us how this has been worked out. | | | | | |  | | | | | | |
| How have you identified a need for this project within your community?  Suggested word limit - 150 words | | | | | |  | | | | | | |
| Please describe how the community:  1. have been involved in the development of the project  2. have shown support for the project (e.g. letters of support, surveys, local fundraising etc)  3. will be involved in the implementation of the project  Suggested word limit - 200 words | | | | | |  | | | | | | |
| Is this a new project? | | | | | |  | | | | | | |
| If your project is already running, please describe how it has been funded to date. | | | | | |  | | | | | | |
| Does your project require any permits or planning permission? If so, are these in place? Please give details. | | | | | |  | | | | | | |
| How much are you applying to SSE for? | | | | | | How much does your project cost in total? | | | | | | |
| **£** | | | | | | **£** | | | | | | |
| **Project Budget**  Please provide, or attach separately, a full cost breakdown of the whole project and indicate which elements you are requesting from this fund. Please enclose quotes or evidence where possible. | | |  | | | | | | | | | |
| Is your application to fund a position or salary? If so, can you confirm that the level of salary is at, or greater than, the Living Wage. | | |  | | | | | | | | | |
| **What other sources of funding have you applied for?** | | | | | | | | | | | | |
| Name of funder | | | | | Amount requested | | | Confirmed funding? | | | Date confirmed | |
|  | | | | | **£** | | |  | | |  | |
|  | | | | | **£** | | |  | | |  | |
|  | | | | | **£** | | |  | | |  | |
|  | | | | | **£** | | |  | | |  | |
| Will you be contributing any of your own funds to the projects or undertaking local fundraising to help meet the costs? If so, please state how much and how these funds have been raised. | | | | | |  | | | | | | |
| When does your project start/finish? | | | | | |  | | | | | | |
| What will happen if we can’t award you this grant? | | | | | |  | | | | | | |
| **Details of independent referee** | | | | | | | | | | | | |
| Name | | | | | |  | | | | | | |
| Organisation | | | | | |  | | | | | | |
| Telephone number | | | | | |  | | | | | | |
| Position | | | | | |  | | | | | | |
| Relationship to your organisation | | | | | |  | | | | | | |
| **Section 4:** Checklist | | | | | | | | | Yes | | | No |
| We have appropriate procedures in place to carry out our project safely | | | | | | | | |  | | |  |
| I can confirm this project doesn’t require retrospective funding | | | | | | | | |  | | |  |
| I can confirm that any level of salary paid is at, or greater than, the Living Wage | | | | | | | | |  | | |  |
| **I have included the following documents with my application:** | | | | | | | | | | | | |
| A signed copy of the organisation’s constitution | | | | | | | | |  | | |  |
| The organisation’s latest annual accounts (independently verified) | | | | | | | | |  | | |  |
| A copy of an organisation bank statement from within the last 6 months (to pay grant into) | | | | | | | | |  | | |  |
| Project budget plan | | | | | | | | |  | | |  |
| Quotes for relevant pieces of work – please see guidelines | | | | | | | | |  | | |  |
| A copy of the organisation’s Child Protection/Vulnerable Adult Policy (if applicable) | | | | | | | | |  | | |  |
| Letters of support (if applicable) | | | | | | | | |  | | |  |
| A copy of latest AGM minutes (if applicable) | | | | | | | | |  | | |  |
| I have attached additional information with this application (please detail below) | | | | | | | | |  | | |  |
|  | | | | | | | | | | | | |
| **Declaration**  By submitting this application form to SSE, you certify that the information provided is correct, and that you, the contact person listed in Section 1, are authorised to make the application on behalf of the above group. You understand that decisions made by SSE are final.   |  | | --- | | Signed:  Date: |   **Data protection**  We will use the information you give us to help assess your application and administer any grant we award you. We may also use it to analyse our grant-making and for our own research. Please read our [Data Protection Privacy Notice](https://www.sserenewables.com/privacy-notice/) before applying for funding.  Completed forms and accompanying information should be returned  electronically to <david.shearer@sse.com>  **Issued July 2023** | | | | | | | | | | | | |