Stronelairg community fund application form

(applications BETWEEN £501 - £10,000)

Please read the guidelines before completing this form. All sections must be completed and returned to carol.masheter@sse.com

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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) |  |
| What are the main activities of the organisation and what service do you provide?Suggested word limit 150 words |  |
| Please provide some background information on your organisation. How, why and when was it set up? |  |
| Where does your organisation work? Which organisations (if any) provide a similar service locally, and who benefits from your organisation? |  |
| If applicable, what’s your charity number? |  |
| Which organisations (if any) provide a similar service locally? |  |
| Please describe who benefits from your organisation or group? |  |
| 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/Deficitlast 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 * 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 |  |
| In which Highland Community Council area(s) will the project take place(**Please indicate all that apply**) | **⃝ Stratherrick and Foyers****⃝ Laggan****⃝ Spean Bridge, Roy Bridge and Achnacarry****⃝ All** |
| Please provide the percentage of members who live in each of the Highland Community Council areas. |  **Stratherrick & Foyers %** **Laggan %** **Spean Bridge, Roy Bridge and Achnacarry %** |
| How have you identified a need for this project within your community?Suggested word limit - 150 words |  |
| How many people will benefit from the project? How has this been worked out? |  |
| Please describe how the community:* have been involved in the development of the project
* have shown support for the project (e.g. letters of support, surveys, local fundraising etc)
* 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. |  |
| Can you give examples of other successful community projects you have carried out? |  |
| Can you describe how your project represents value for money? |  |
| Will you project contribute to the local economy? If so, how? |  |
| How will you maintain/sustain your project after period of funding has ended? |  |
| Does your project require any permits or planning permission? If so, are these in place? Please give details. |  |
| Is your application to fund any salary? If so, can you confirm that the salary if at or above the Living Wage? |  |
| How much are you applying to SSE Renewables 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. |  |
| Please explain how you have sourced best value for the items requested from the fund. |  |
| **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. If not, please explain why. |  |
| Who will manage the project and carry out the work required? |  |
| When does your project start/finish? |  |
| What will happen if we can’t award this grant? |  |
| If your grant is successful, please specify who the award should be made payable to. This must not be an individual’s bank account and must require two signatories. We also require a recent copy of a bank statement to verify payment. |
| Account name |  |
| **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 | [ ]  | [ ]  |
| If requested, we provide contact details of an independent referee. | [ ]  | [ ]  |
| **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 and not more than 12 months old) | [ ]  | [ ]  |
| An organisation bank statement from within the last 6 months | [ ]  | [ ]  |
| A 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) | [ ]  | [ ]  |
| Please confirm that your organisation has at least three unrelated people serving on the management committee (or equivalent) | [ ]  | [ ]  |
| If you hold an Annual General Meeting, please provide the minutes of the last meeting | [ ]  | [ ]  |
| I have attached additional information with this application (please detail below) | [ ]  | [ ]  |
|       |
| **Declaration**By submitting this application form to SSE Renewables, you certify that the information contained in this application 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.**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 carol.masheter@sse.com

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| Signed:  Date: |

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