Caithness Beatrice Fund

Application Form £20,000 - £50,000

Please read the guidelines before completing this form. All sections must be completed, and applications must be returned electronically 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) |   |
| Organisation address(including postcode) |  |
| What are the main activities of your organisation/what service do you provide? |  |
| Please provide some background information on your organisation. How and why was it set up? |  |
| Where does your organisation work? |  |
| Which organisations (if any) provide a similar service locally? |  |
| Please describe who benefits from your organisation or group? |  |
| 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 in addition to your management committee? | How many full-time staff do you employ? | How many part-time staff do you employ? | How many members does your organisation have? |
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| **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 amount awarded and details |  |
| **Section 3:** Grant application |
| Please describe the project you are looking for SSE 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? |  |
| How does your project fill a ‘needs gap’ in your local area? Guidance Note –Where possible link this to local evidence e.g. NOMIS/local labour market statistics; Scottish Index of Multiple Deprivation data; Scottish Neighbourhood Statistics.Maximum 300 words |  |
| How many people will benefit? Please tell us how you have worked this out.Please provide the percentage of members who live in each of the community council areas. |  **Sinclair’s Bay %** **Wick %** **Tannach and District %** **Latheron, Lybster and Clyth %** **Berriedale and Dunbeath %** |
| What are the intended outcomes of the project and how will you measure success?Guidance Note• Outcomes are the economic, social and/or environmental benefits/changes that you seek to make from your programme• Where possible make sure your outcomes are clear, achievable, specific, and realistic. • Make sure your outcomes link logically to the needs gap you have identified.• Please limit the number of outcomes to a manageable number (we suggest no more than 5 outcomes)Maximum 300 words |  |
| How have you identified a need for this project within your community?  |  |
| What evidence do you have that local people support your project? (e.g., letters of support, surveys, local fundraising etc.) |  |
| Please describe how the community:a) have been involved in the development of the projectb) will be involved in the implementation of the project |  |
| 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 your project contribute to the local economy? If so, how? |  |
| How will you maintain/sustain your project after the period of funding is finished? |  |
| Does your project require any permits or planning permission? If so, are these in place? Please provide evidence. |  |
| For projects which include building or access works please provide a copy of title deeds or lease. Include details of future maintenance arrangements. |  |
| 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\*\*Please see the Fund Guidelines. |  |
| How much are you applying to SSE for? | How much does your project cost? |
| **£** | **£** |
| 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 a minimum of three quotes or evidence where possible. |

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| **Item** | **Total Cost £** | **SSE Request £** |
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| 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? |  |
| How many people will benefit? Please tell us how you have worked this out. |  |
| When does your project start/finish? |  |
| What will happen if we can’t award you 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 be an account where two signatories are required.** |
| Account name |  |
| We run an employee volunteering scheme, whereby SSE teams are provided with time to help community organisations. If we had a team available to help your organisation, would volunteering support be of interest to you? | Yes**[ ]**  | No**[ ]**  |
| **Section 4:** Checklist |
|  | **Yes** | **No** |
| We have appropriate procedures in place to carry out our project safely | [ ]  | [ ]  |
| We confirm there are at least three unrelated people serving on the management committee | [ ]  | [ ]  |
| I can confirm this project doesn’t require retrospective funding | [ ]  | [ ]  |
| **I have included the following documents with my application:** |
| A signed copy of the organisation’s constitution | [ ]  | [ ]  |
| If you hold an AGM: The minutes of the last meeting | [ ]  | [ ]  |
| The organisation’s latest annual accounts (independently verified) | [ ]  | [ ]  |
| A copy of your most recent Bank Statement | [ ]  | [ ]  |
| Project budget plan | [ ]  | [ ]  |
| A copy of the organisation’s Child Protection/Vulnerable Adult Policy (if applicable) | [ ]  | [ ]  |
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| **Declaration**By submitting this application form to SSE, 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 david.shearer@sse.com  |
| Date submitted |       |