Kirkby Neighbourhood Community Fund 2024

Application Form

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| **Please read the application guide before completing this application form**.  Questions in the application form should be answered by typing directly into the fields next to the questions. If you are unable to type into the form, handwritten forms will be accepted.  All sections must be completed – if they aren’t applicable, put ‘N/A’  Please return the form, along with supporting documents to [**kirkbyfund.uk@suez.com**](mailto:kirkbyfund.uk@suez.com) **or Kirkby Neighbourhood Community Fund, SUEZ Recycling and recovery UK, Springfield House, Lower Eccles Hill Road, Darwen, Lancashire BB3 0RP.**  The deadline for all applications is **5pm on Friday 26 July 2024.** |

## SECTION ONE: Applicant Information

This is the information about your group / organisation, and the main contact for the project.

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|  | | | | | | GUIDANCE NOTES |
| 1 | Name of your group / organisation | Click here to enter text. | | | | This is the organisation which will take legal responsibility for the project if the application is successful and will sign the Funding Agreement. |
| 2 | Group / organisation's main address | Click here to enter text. | | | | This is the registered address of the organisation with whom a Funding Agreement will be signed if the application is successful. It may be a different address to the one used for correspondence with the main contact which is requested below. |
| Questions 3 to 10 ask for details of the person who will be the main contact for all correspondence relating to your application. | | | | | | |
| 3 | Main Contact Title | Click here to enter text. | | | | i.e. Mr, Mrs, Dr etc. |
| 4 | First Name | Click here to enter text. | | | | |
| 5 | Last Name | Click here to enter text. | | | | |
| 6 | Position | Click here to enter text. | | | | e.g. Secretary, Treasurer, Chair Person |
| 7 | Main correspondence address | Click here to enter text. | | | | This address will be used for all postal correspondence relating to the application. Please put ‘N/A’ if this address is the same as provided in Q2. |
| 8 | Main contact telephone number | Click here to enter text. | | | | |
| 9 | Alternative contact telephone number | Click here to enter text. | | | | Please provide a second telephone number - this could be a mobile number or somewhere that we can leave a message. |
| 10 | Main contact email address | Click here to enter text. | | | | Please provide an email address which we can use for correspondence. |
| 11 | Organisation / group’s website or any other internet presence | Click here to enter text. | | | | If the group does not have its own webpage it might a have a Facebook page or be mentioned on other organisations websites. If not, write ‘N/A’. |
| 12 | Please provide a brief description of the applying group / organisation, including the type of organisation and the year it was established.  (Approx 50 words) | Click here to enter text. | | | | For example:  X is a charitable organisation, set up in 2010, with the aim of educating the next generation about their waste in an effort to reduce consumption. We work with X young people through schools and local groups and our main activities include… |
| 13 | Charity number and / or company number | Click here to enter text. | | | | If not applicable, write ‘N/A’ |
| 14 | Does your organisation have the following policies / documents?  If the response is yes – please supply copies of the documents with your application. |  | | Yes | No | Please click to mark the boxes with ‘x’ to indicate as appropriate.  A formal constitution is a set of rules for your group and is a requirement for funding.  A safeguarding policy and the relevant insurance is required if you are working with young or vulnerable people. |
| A formal constitution | |  |  |
| A health and safety policy | |  |  |
| A safeguarding policy | |  |  |
| Public liabilities insurance | |  |  |  |
| An equal opportunities policy | |  |  |
| An environmental policy | |  |  |
| 15 | Please provide the name, position and contact details for two other members of your group / organisation who are aware of this request for funding  (e.g. Chairperson, Secretary, Treasurer, Committee Member, Trustee etc.) | **Contact one** | | | |  |
| Name | Click here to enter text. | | | |
| Position | Click here to enter text. | | | |
| Email Address | Click here to enter text. | | | |
| Telephone Number | Click here to enter text. | | | |
| **Contact two** | | | |  |
| Name | Click here to enter text. | | | |
| Position | Click here to enter text. | | | |
| Email Address | Click here to enter text. | | | |
| Telephone Number | Click here to enter text. | | | |

## SECTION TWO: About Your Project

This section is an opportunity to give us some detail about your project and what you are hoping to achieve.

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| 1 | What is the name of the project you are asking us to fund? | Click here to enter text. | | Please tell us the name of your project. i.e. Community Centre Kitchen Renovation |
| 2 | Which ward area(s) of Kirkby neighbourhood will your project primarily benefit? | Northwood |  | Please mark the boxes with ‘x’ to indicate as appropriate.  If you are unsure, you can view ward areas here - https://knowsleyknowledge.org.uk/ward-profiles-2/ |
| Cherryfield |  |
| Shevington |  |
| Whitefield |  |
| Prescot North (Knowsley Village) |  |
| 3 | Where will your project be delivered? | Click here to enter text. | | This is the location of your project. Please give a specific address and postcode if possible or, if multiple locations, give the list of locations. |
| 4 | Which of the funding themes does your project primarily contribute towards? | Click here to enter text. | | Please state one of the following funding themes as described in the guidance document:   * Community Improvement * Health & Wellbeing * Environmental improvement |

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| 5 | Please provide a description of your project  (around 250 words) | Click here to enter text. | This is your main chance to explain your project.  Include:   * What are you asking us to fund and who will the project benefit? * What are the aims of your project? * How does the project meet the objectives of the funding theme(s)? (see the application guide) * How will your project make a difference to the local community? |
| 6 | Please estimate how many people in total will benefit from the project and tell us who they are. | Click here to enter text. | This can be both directly and indirectly.  For example, ‘20 older people or 100 residents of Kirkby directly, or a specific neighbourhood indirectly’ |
| 7 | How are you going to advertise your project? | Click here to enter text. | It is important that local people are aware of the project so it is important to consider how you will do this.  For example, your existing connections / advertising on social media / in local meetings. |
| 8 | Anticipated project start date (month/year) | Click here to enter text. | Please note that projects must start within 3 months of a funding offer being made. |
| 9 | Anticipated project end date (month/year) | Click here to enter text. | Please note that projects must be completed by the end of 2025. |
| 10 | Is planning permission or any other form of consent required for the project? If yes, please describe. | Click here to enter text. | Please give details of any permissions or consents that are required and information relating to the progress of obtaining any required permissions or consents.  If not applicable, write ‘N/A’ |
| 11 | How will you measure the impact of your project? | Click here to enter text. | How will you know you have made a difference? How will you show your achievements?  For example, questionnaires following the activity for those who took part / survey |

## SECTION THREE: Financial Information

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| 1 | Does your group / organisation have a bank/building society account in its own name? | Click here to enter text. | | Please answer Yes or No |
| 2 | If ‘yes’ to question 1, do cheques have to be signed by two signatories? | Click here to enter text. | | Put N/A if you answered ‘no’ to Q1 |
| 3 | Does your group / organisation keep financial records and/or produce annual accounts? | Click here to enter text. | | Please answer Yes or No  This is a requirement – we need to have a record of your last year of accounts |
| 4 | Please give us the details of the group’s Bank / Building Society Account into which we should pay a grant if you are successful. | Name of Account | Click here to enter text. | |
| Bank / Building Society Number | Click here to enter text. | |
| Account Number | Click here to enter text. | |
| Sort Code | Click here to enter text. | |

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| 5 | BUDGET: Please list the elements of the project that you are asking us to fund  *Note that you are required to submit an outline of this proposal alongside the application to provide evidence against the estimated costs (eg. quotes from tradespeople / screenshots of costs from websites etc)* | | Item / activity  (i.e. new tables, re-lay entrance pathway) | | | Cost (£) |
| Click here to enter text. | | | £ enter amount |
| Click here to enter text. | | | £ enter amount |
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| Click here to enter text. | | | £ enter amount |
| Click here to enter text. | | | £ enter amount |
|  | Total funding requested | | | | | £ enter amount |
| 6 | If parts of the project are being funded from another source, please give details here.  *If not applicable, put ‘N/A’* | | Item | Cost (£) | | Where is the money coming from? |
| Enter text. | £ enter amount | | Enter text. |
| Enter text. | £ enter amount | | Enter text. |
| Enter text. | £ enter amount | | Enter text. |
| Enter text. | £ enter amount | | Enter text. |
|  | Total | | | £ | | |
| 7 | Have you applied for funding from anywhere else for this project? | Click here to enter text. | | | If yes, please provide details. If not, please put ‘N/A’ | |

## SECTION FOUR: Additional Information or Comments

If you would like to provide any additional information or comments to support your application, please do so here. If not, please put ‘N/A’

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| Click here to enter text. |

## SECTION FIVE: Declaration

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| Please confirm on behalf of the applying organisation detailed in Section 1, that you are duly authorised to submit this application and that, to the best of your knowledge and belief, all answers to the questions are true and accurate. | Name | Click here to enter text. |
| Position | Click here to enter text. |
| Date | Click here to enter text. |

## SUBMITTING YOUR APPLICATION

If you have completed this application electronically, please email it to **kirkbyfund.uk@suez.com**

If you have completed a paper copy, please post it to **Kirkby Neighbourhood Community Fund, SUEZ Recycling and recovery UK, Springfield House, Lower Eccles Hill Road, Darwen, Lancashire BB3 0RP**

The deadline for all applications is **5pm on Friday 26 July 2024.**

**Please ensure that you read the guidance document before submitting your application.**

**You are required to also submit the following supporting documentation – without these, your application is likely to be unsuccessful.**

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| Outline of budget proposal Applicants must be able to demonstrate that the amount being requested accurately reflects the likely cost of carrying out the project or activity.  This may include quotes from contractors, price of materials or equipment required etc. |
| An outline plan of the activity This could include designs, plans or photos where possible to illustrate the project.  For example, if you are requesting funding for replacement play equipment, please provide a photo of the existing play area and any designs for the new area. |
| Most recent set of accounts Full set of audited accounts for latest financial year. |

**The deadline for submitted the above, along with the completed application form, is 5pm on Friday 26th July 2024.**

**All applicants will receive an acknowledgement as well as an email following the decision-making meeting outlining whether or not the application for funding has been successful. We anticipate decisions to be made by the end of September 2024.**

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| *The Kirkby Neighbourhood Community Fund is funded and managed by Merseyside Energy Recovery Limited (MERL).*  *MERL is the organisation appointed by Merseyside Recycling & Waste Authority (MRWA) to treat Merseyside and Halton’s residual waste. SUEZ recycling and recovery UK is both one of the shareholders in MERL and the operator of the service.* |