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**COST OF LIVING COMMUNITY FUND**

**APPLICATION FORM**

**IMPORTANT INFORMATION**

# Before completing this application form, please ensure that you have read the criteria and guide for applicants document to ensure your application is eligible under this scheme and that you meet all requirements.

# Your application will be checked and assessed based on the information you provide in this application form. So please make sure that all sections are completed in full and that you have attached the supporting documents as required.

# Deadline for applications is 23:59 on Tuesday 17 January 2023. Late applications will not be accepted. Applicants will be informed of the funding decision week commencing Monday 30 January 2023.

# Please submit your completed application form together with supporting documents by the deadline via the [Good Exchange](https://thegoodexchange.com/)

# If you need help with completing this application form or have any questions regarding the process, please contact Basingstoke and Deane Borough Council by emailing grants@basingstoke.gov.uk

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| **Stage** | **Date** |
| Scheme opens for application | Wednesday 7 December 2022 |
| Deadline for application | Tuesday 17 January 2023 |
| Completion of evaluation and assessment of applications | Friday 27 January 2023 |
| Notification of outcome to applicants | w/c Monday 30 January 2023 |
| Deadline for return of grant agreements | Friday 10 February 2023 |
| Payment of grants | w/c Monday 13 February 2023 |
| End of activities and funding | Monday 31 July 2023 |
| Final progress report due | Thursday 31 August |

**SECTION ONE: ABOUT YOUR ORGANISATION**

**Please tell us about your organisation, its aims and objectives and its target audience.**

* 1. **What are the contact details of your organisation?**

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| **Name of organisation** | *This must be the full name of the organisation that will enter into a funding agreement, as stated on your constitution document* |
| **Contact address (incl. postcode):** |  |
| **Website Address:** |  |
| **Name of contact:** |  |
| **Position:** |  |
| **Email address:** |  |
| **Telephone number:** |  |

**1.2. What is the status of your organisation?**

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| --- |
| **Please tick as appropriate** |
| Charity |  |
| Constituted group (unincorporated association) |  |
| Community interest company |  |
| Limited company |  |
| Industrial Providence Society (mutual or cooperative organisation) |  |
| Partnership |  |
| Other (please give details) |  |

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| --- | --- | --- |
| **Is your organisation part of a larger organisation?**(If yes, please specify below) | Yes | No |
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| **Please provide your organisation’s registration number(s) (if applicable)** |
| Charity number |  |
| Company number |  |
| VAT number |  |
| Business rates account number |  |

**1.3 What is the purpose of your organisation?**

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| **Please provide a detailed description of what your organisation does, its aims and objectives, the types of activities and services it delivers and its target audience/client base** |
| **Word limit - up to 150 words** |

**SECTION TWO: WHAT DO YOU WANT TO DO WITH THE FUNDING AND WHY DO YOU NEED IT?**

**In this section, you will need to provide detailed information on what you intend to do with the funding and what services and activities you will deliver to support residents affected by the rising cost of living.**

**The scheme does not intend to support normal operating costs or core organisational costs.**

**Please refer to the scheme’s criteria and guidance for applicants to check the sort of activities that are eligible under this scheme.**

**2.1 What will you do with the funding?**

**This is a scoring question with a weighting of 5.**

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| **This question focuses on how you intend to use the funding so please provide as much detail as possible to help us understand what you will spend the funding on and the activities it will help you undertake to support residents affected by the rising cost of living.** |
| **Word limit – up to 500 words** |

**SECTION THREE: WHAT COMMUNITY NEEDS WILL THE FUNDING HELP YOU ADDRESS?**

**In this section, you are asked to provide detailed information on how the funding and the activities you will deliver will help you meet community needs. Please also tell us how you have identified these needs. You are also asked to tell us about the client base or target group(s) the funding will benefit.**

**3.1 What community needs will the activities you are seeking funding for address?**

**This is a scoring question with a weighting of 5.**

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| **This question focuses on community needs so please provide as much detail as possible on what these needs are and how they have been identified and what evidence you have used. This can include user surveys, research and data analysis, stakeholder engagement, etc.** |
| **Word limit – up to 400 words** |

**3.2 Who will the funding benefit?**

**This is a scoring question with a weighting of 5.**

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| **This question focuses on the client base and/or target groups the funding will help you better support so please provide as much detail as possible on who your beneficiaries are and how the services and activities you will deliver will help them.** |
| **Word limit – up to 250 words** |

**SECTION FOUR: WHAT OUTCOMES AND ADDED VALUE WILL THE FUNDING HELP YOU ACHIEVE?**

**In this section you are asked to describe the difference the funding will make. You will need to describe the outcomes and added value you expect to achieve with the funding. This section also asks about your approach to diversity, inclusion and equality, and environmental sustainability.**

**4.1 What outcomes and added value do you expect to achieve?**

**This is a scoring question with a weighting of 5.**

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| **This question focuses on the change and the impact the funding will have so please describe in detail what outcomes you expect to achieve. Tell about the difference the activities and services you will deliver will make to the residents you are targeting. Please also tell us about you will measure progress, performance and success.**  |
| **Word limit – up to 500 words** |

**4.2 How will you make sure you consider equality, diversity and inclusion in the activities the funding will help you achieve?**

**This is a scoring question with a weighting of 5.**

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| **This question focuses on you will make sure the activities and services you will deliver with the funding are accessible and inclusive.**  |
| **Word limit – up to 250words** |

**SECTION FIVE: HOW MUCH FUNDING DO YOU NEED AND WHAT WILL YOU SPEND IT ON?**

**In this section, you are asked to state the level of funding you are applying for and to provide a detailed breakdown of what the funding will be spent on. You will need to include a detailed budget outlining total costs, match funding and expected income (if applicable). You will also need to provide a timeline of when you expect things to happen and key milestones.**

**Value for money is also an important aspect so please tell us about the return on investment you expect to achieve.**

**5.1 How much funding do you need?**

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| **Please tell us how much grant funding you will require to enable you to deliver the planned activities and to achieve the expected outcomes. Remember to only apply for the amount you need. As a reminder****, organisations can apply for up to £5,000.** |
|  |

**5.2 Is your organisation VAT registered and can therefore recover VAT?**

**Please tick as appropriate**

|  |  |  |  |
| --- | --- | --- | --- |
| **YES** |  | **NO** |  |

**5.3 What will you spend the funding on?**

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| **Please provide a detailed description of what the funding will be spent on by completing the budget table below detailing breakdown of costs and expenditure, sources of funding, match-funding and income (if applicable). Please make sure you explain what each budget line is.****Please also state whether any other sources of funding you intend to use are secured or expected.****Remember that the Cost of Living Community Fund will only fund additional costs and does not intend to cover normal or existing operating costs. Please refer to the scheme’s criteria for more information.** **If your organisation is VAT registered and can recover VAT, please ensure that all expenditure/income subject to VAT is entered without VAT in the budget table.** |

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| --- | --- |
| **Budget and cost breakdown** |  |
| **Expenditure – please provide a description of each item of expenditure** | **£** |
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| **Sub-total 1** | **£** |
| **Income - description** | **Expected or confirmed** | **£** |
| Fees/contribution from users |  |  |
| Grant funding from other organisations (please specify source of funding) |  |  |
| Sponsorship (please specify who the sponsorship is from) |  |  |
|  Match-funding |  |  |
|  Other – please specify |  |  |
|  |  |  |
| **Sub-total 2** | **£** |
| **Total cost of project (sub-total 1)** | **£** |
| **Total income (sub-total 2)** | **£** |
| **Total cost minus total income****(Grant amount requested from the Cost of Living Community Fund)** | **£** |

**5.4 How much cash reserves does your organisation hold and what are they used for?**

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| **Please tell us about the amount of cash reserves your organisation holds and what they are for. Please provide the amount of restricted/committed and unrestricted/uncommitted reserves your organisation holds. Described what these reserves are for and explain clearly why unrestricted/uncommitted reserves cannot be used to fund the activities you are seeking funding for.** |
| **Amount of restricted/committed cash reserves** | **£** |
| **Amount of unrestricted/uncommitted cash reserves** | **£** |
| **Wordcount limit – up to 200 words** |

**5.5 How have you worked out your costs?**

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| **Please tell us the assumptions you have used to work out your expenditure and provide any explanations you feel are necessary.** |
| **Wordcount limit – up to 200 words** |

**5.6 When will you spend the funding and what are your key milestones?**

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| **This question focuses on when you will deliver the activities you are seeking funding for. Please tell us about your planned timeline and complete the delivery plan table below to identify key milestones, delivery timescales and expected outcomes.** |
| **Wordcount limit – up to 250 words.****Delivery plan**

|  |  |  |
| --- | --- | --- |
| **Activity/milestone** | **Expected Date** | **Expected outcome** |
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**SECTION SIX: CHECKLIST**

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| **Have you completed all sections of this application form?** |  |
| **Have you included a copy of your constitution or statutes?** |  |
| **Have you included a copy of your last set of annual audited accounts?** |  |
| **Have you included a copy of a recent bank statement?** |  |
| **Have you included a detailed budget?** |  |
| **Have you included a delivery plan with clear milestones?** |  |