

**Adult Social Care Small Grant Programme 2023-2024**

**Voluntary Organisations and Community Groups**

**Application Form**

**The programme is a grant funding opportunity for community-based activity that** **enables people to stay physically and mentally well and to maintain their independence**. **Funding is up to a maximum of £5,000 for activity delivered between 1st April 2023 and 31st March 2024.**

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| **1. Name of your organisation or group:** |
| **2. Contact details:** **Name:****Tel No:** **Mobile No:** **E-mail:**  **Address of organisation:** |
| **3. What is the constituted status of your voluntary organisation or community group? What is your registered charity or company number? (Please see grant guidance on which constituted groups we can fund)**  |
| **4. What is the annual gross income of your organisation?** **£****What is the current level of reserves held by your organisation at the date of this application?**  **£**  |
| **5. What is the amount of grant funding you are applying for? (Please note the Council reserves the right to offer less than the amount requested)****£**  |
| **5a. Would the activity you’re looking to fund be viable in the event that your application was only partially successful? (Y/N)** |
| **6. Please describe the main activities of your organisation or group and your aims and objectives****6a. How many staff and volunteers do you have?****Staff:****Volunteers:** |
| **7. Please give a description of the activities that would be funded by this grant.****7a. Who are the people who will benefit from this activity? Approximately how many people will the activity support in 2023/24?****7b. Where in Shropshire will the activity take place?** |
| **8. Expected outcomes** **Please give details of the outcomes the grant funding will achieve for the following:** * **The people who are taking part in the funded activity**
* **The wider community**
* **Adult Social Care and Shropshire Council**

Give specific outcomes and demonstrate how these support [The Shropshire Plan](https://shropshire.gov.uk/the-shropshire-plan-2022-2025/) and the priorities for Healthy People. These are: • Tackle inequalities • Early intervention • Partnerships • Self responsibility**8a) Please describe the Social Value that will be delivered as a result of the grant** (in accordance with Shropshire’s Social Value approach <https://shropshire.gov.uk/social-value/> ) |
| **9. Costs and Funding**Please give a breakdown of the activities and associated costs you wish to deliver with this funding.If the grant is not designed to cover all the costs of the activities please provide details of other funding sources, including other grants and contributions from your reserves.  |
| **9a. What financial reporting systems does your organisation currently have in place?**  **(**e.g. annual accounts, treasurers report, bank statements etc?Current copies of your most recent accounts/reports/statements will be requested if your application is successful)**9b. Please confirm that you have a constitution and bank account in the organisation or group name?** (This is a requirement of the grant funding) |
| **10.** **Can you confirm that you are able to satisfy the following level of Insurance if you are awarded** **Grant Funding?** Public Liability: £5 million Employers Liability £5 million**Yes / No**   |
| **11.** **Please confirm that your organisation has policies in place for the recruitment of employed staff and volunteers to ensure that they are appropriate for the activities delivered, are working appropriately and have an awareness of safeguarding concerns and how to report these.****Volunteers – YES/NO****Employed staff – YES/NO** |

In applying for Grant Funding from Shropshire Council I undertake on behalf of -

(Name of Organisation) to abide by terms and conditions of the grant agreement associated with the funding.

**Signed:………………………………………………………………………………………...**

**Name:…………………………………………………………………………………………..**

**Position in Organisation:…………………………………………………………………..**

**Date:……………………………………………………………………………………………**