AYLESBURYNOW



Notting Hill Genesis

Aylesbury Community Grants Application Form – Level 1 (up to £500)

Please write in capitals or type in black ink. Use additional sheets if necessary.

	T
Date: Name of your organisation or group (if applicable):	
or group (or approximate).	
Contact details	
Name of main contact person:	
Position in organisation/group (if a	applicable):
Address:	
Daytime telephone Number:	
Mobile Number:	
Email Address:	
About your organisation/group	/if applicable)
About your organisation/group Please describe the overall aims of	of your organisation/group:
l lease describe the overall alms (or your organisation/group.

About your project/activity
Project title:
Please describe the project/activity for which you are applying for a grant:
When are you planning your project to start and to finish?
Start: Finish:
How do you know that there is a local need or interest for this project/activity?
How many people do you expect to benefit from your project or activity?
What proportion of participants do you expect to be Aylesbury residents*?
*Please note that we will not fund projects unless 75% of participants are Aylesbury residents
Please describe whether any of the people who will benefit from the project include any of the following groups (Tick the boxes that apply and give approximate numbers/percentages).
□ BME:number%
☐ Young people:number%
Children:number%
☐ Older people:number%
☐ Lone parents/carers:number%
People with disabilities:number%

Criteria	Yes/No	How?
Increase in the number of residents who feel that their local area is a place where people can get on well together; through your community project (i.e. environmental projects, intergenerational schemes, bringing existing and new residents together etc.)		
Increase in the number of contacts with hard to reach community groups through community activities and projects (i.e. adult literacy classes, ESOL, etc.)		
Increase in opportunities for resident involvement in your local neighbourhood (i.e. youth involvement and volunteering)		
Capturing Aylesbury's history (i.e. oral history projects, visual arts, etc.)		
Trialling a local social enterprise to benefit Aylesbury residents		
How will you measure the success of you people involved, other)	ur project/	activity? (i.e. recording the number of
Will your project/activity involve working or vulnerable adults unsupervised? Yes		ren/young people under 18 years old

Project Finances	I	
How much will your project cost in total?		
How much do you require from Notting Hill Genesis?		
Please list the main items of expenditure below:		
Item		Cost
Total amount		
Total amount		
To whom should the cheque be made payable to if your applic	ation is su	uccessful?
Name:		
If another organisation is accepting money on your behalf, ple agreement below (please enclose a copy of their bank state		nem to sign the
agreement below (piease enclose a copy of their bank state	oment)	
I am authorised to accept a grant on behalf of:		
Organisation:		
Print Name:		
Position in organisation:		
Address:		
Telephone Number:		
Email address:		
Signature:		
Date:		

Agreement & Signatures

Thurlow Street London SE17 2UQ

It is vital that this section is completed. Any forms without signatures and relevant documents will be returned to the applicant and will not be considered for funding.

If awarded a grant:
 I will ensure that the grant is used for the purpose outlined in this application I will ensure that the grant is spent within 12 months of receiving the grant payment I will provide receipts as proof of expenditure I will provide photographs and other documentation on the completed project
Name:
Signature:
Position in organisation/group (if applicable):
Date:
Consent
We may use photos you send from your project for publication. Please tick if you agree
for your material to be used in any of Notting Hill Genesis' publications.
for your material to be used in any of Notting Hill Genesis' publications. Yes \Boxedon No \Boxedon
Yes No No
Yes No D PLEASE RETURN YOUR SIGNED FORM TO:
Yes No No PLEASE RETURN YOUR SIGNED FORM TO: By e-mail:

PLEASE KEEP A COPY OF YOUR APPLICATION FOR YOUR REFERENCE