

Does your organisation have a management committee?

Yes No

If yes, how many members are there?

What geographical area(s) do you cover?

If you cover the whole of the Southwark or a particular ward or area, please state:

About your project

Project title:

Please describe the project 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 in this project?

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%
- Other (please give details):

Grant criteria

Please tell us how your project will meet the criteria by completing the boxes below that relate to your project/activity.

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 your project? (i.e. recording the number of people involved, evaluation forms, outcomes achieved, tangible benefits to the local area)

If you are working with children, young people and vulnerable adults; does your group/organisation have an up to date Safeguarding Vulnerable Adults and Child Protection Policy?

Yes No

If yes, please attach with your application.

If not, you may be able to adopt Notting Hill Housing's related policies. Please indicate if your organisation is willing to do so Yes No

Do you staff/volunteers have a current DBS check*:

Yes No

****Please note that for any organisations working with children and young people under the age of 18 and/or vulnerable adults, all staff working with these groups must have a current and satisfactory DBS check in place.***

Project finances

How much will your project cost in total?

How much do you require from Notting Hill Genesis?

How do you expect to cover the remaining costs not covered by this application (if applicable)?

If this is a longer term project; how do you plan to fund this after the community grant has finished?

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, as well as the monitoring and evaluation form on the completed project

Name:

Signature:

Position in organisation:

Date:

Checklist

I have enclosed the following documents with this application (please tick):

- Constitution and rules (if organisation is accepting monies on your group's behalf, we require their constitution and rules as well)
- Most recent bank statements (for the last three months)
- Audited or most up-to-date accounts
- Photos
- Copy of child protection and/Safeguarding vulnerable adults policy (if applicable)

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.

Yes No

PLEASE RETURN SIGNED FORM TO:

By e-mail:

aylesbury@nhhg.org.uk

By post:

Aylesbury Community Grants programme
Notting Hill Genesis
2nd Floor Taplow
Thurlow Street
London SE17 2UQ

**PLEASE KEEP A COPY OF YOUR APPLICATION
FOR YOUR REFERENCE**