

# Healthy Places Funding Application Form

Please ensure that you have read and understood the General Criteria, Guide to the Application Process along with the Terms and Conditions of Funding before you complete this application form which is available on cumberland.gov.uk

Please write clearly using BLOCK CAPITALS when completing this application form by hand.

Please complete all boxes.



#### **Section 1: Contact information**

a) Name of Group/Organisation	Registered	Charity	No. if	applicab	ole

- b) Contact Name
- c) Telephone Number
- d) Contact Address
- e) Postcode
- f) Your Position in the Group
- g) Email Address
- **h)** Cumberland Council will not share any information you provide in sections b)-g) (above), how- ever other community groups or their representatives may wish to contact you.

Do you give your permission to pass on your details?

Yes

No

Please note: you can withdraw your permission at any time.

i) Please give a brief description of your group e.g., who are you, what type of group are you and what you do?
Section 2: Tell us about the event/activity you want us to support
a) Event/Activity – Date/Times/Venue
b) What geographical areas will your event/activity serve?
c) Why do you need this grant and how will any funding be used?
d) Tell us about the wider impact this event/activity will have on the health & wellbeing of your community?

e) Will any other communities benefit besides the event/activity location? f) Tell us how does your event/activity meets the General Criteria Guidance? g) Approximately how many people will benefit from the project or initiative in these age ranges? 0-4yrs 5-11yrs 12-19yrs 20-55yrs 55+yrs h) Does your project target any particular groups? Age Disability

Other/Prefer not to say

**Healthy Places Funding Application Form** 

Sexual orientation

Gender

**Poverty** 

Race

# **Section 3: Financing your event/activity**

(Please note: You are required to provide a detailed breakdown of all costs associated with

your application for funding.)
a) What is the total cost of your event/activity?
<b>b)</b> How much funding are you applying for? (* please note limit of grants available are £100 - £2,000)
c) Is this a completely new event/activity?
Yes
No
d) Is the application for a once only cost?
Yes
No
e) If you are applying for less than the full project costs, how will you fund the remainder?
<b>f)</b> Please tell us who else you have applied to, and the result of other funding applications. Please note Cumberland Council expects to see matched funding.

<b>g)</b> Where do you receive funding from for your organisation e.g. not for profit or community grants?
community grants:
h) Have very manifestally we asked from discretized from a from Council and Council a
h) Have you previously received funding from Cumberland Council?
Yes
No
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received
No If so, please provide further details including when and how much funding you have received

### **Section 5: Additional Information**

**a)** Is there any further information that you wish to provide in support of your application for funding? If you wish to add additional information complete box below or continue on a separate sheet.

#### **Section 6: Checklist**

**PLEASE NOTE:** Your application will not succeed, or fail, based on your answers provided within this section. The following questions are purely designed as a checklist for you, to ensure that you have covered everything required in order to enable the activity/event to take place. If you are in the early stages of planning, then please give a date as to when you are likely to have these in place so we can follow it up, if necessary, in order to meet the conditions.

are in the early stages of planning, then please give a date as to when you are likely to have these in place so we can follow it up, if necessary, in order to meet the conditions.
<b>a)</b> If the event/activity is not taking place on your own land/at your own venue, do you have permission from the landowner/venue owner? If in progress, please confirm expected approval date.
Yes
No
In progress
Expected completion date
<b>b)</b> If the event is taking place on Cumberland Council land, have you completed a Cumberland Council land application form?
Yes
No
In progress
<b>c)</b> Obtained adequate Public Liability Insurance (minimum of £5million) and Employment Liability Insurance (minimum of £10 million)?
Yes
No
In progress
d) Applied for a Temporary Event Notice/License to Occupy (if applicable)?
Yes
No
Not applicable
For further details of any of the above please contact events@cumberland.gov.uk
<b>e)</b> Have you organised sufficient publicity and marketing for your event/activity to encourage participation and attendance:
Yes
No

In progress

#### **Section 7: Supporting Documents**

You are required to enclose the following documents to support your application for funding:

- a) A detailed breakdown of all costs associated with your application for funding.
- **b)** A copy of a recent **bank statement** in the name of the organisation applying for funding (which should match the name/organisation on the application form).
- c) Your equal opportunities policy or statement, where appropriate.
- d) Your constitution or other governing documents.
- **e)** Your **child protection policy**, where appropriate.
- f) Your safeguarding vulnerable adults policy, where appropriate.

#### **Section 8: Declaration**

Please ensure that this form is signed by a governing member of your group.

In signing this declaration, I agreed that:

- 1 The information provided in this application is correct.
- 2 I have read, understand, and accept the Funding Criteria along with the Terms & Conditions of Funding for Cumberland Council.
- 3 I will complete and return an Evaluation Form within 4 weeks of receiving funding. The evaluation form will be issued alongside the grant award notification.
- 4 I have adequate and appropriate insurance cover for our activities/events.
- 5 I have the appropriate licenses in place and landowner permissions to cover our event/activities.

Signatures				
Signed	Position in group			
Print your name	Date			
Time your name	Date			
Please tell us how you found out about our scheme.				

## **Returning Funding Application Form**

If you are submitting your application form with your supporting document via email please send to **events@cumberland.gov.uk** 

If you are submitting your application by post please return to:

Healthy Places Team Neighbourhoods Cumberland Council Civic Centre Carlisle CA3 8QG