

HOLME VALLEY PARISH COUNCIL

HOLMFIRTH CIVIC HALL, HUDDERSFIELD ROAD, HOLMFIRTH, HD9 3AS
Tel: 01484 687460 Email: clerk@holmevalleyparishcouncil.gov.uk



Please complete this form as clearly as possible and return it to the clerk by email or by post to the above address.

From April 2021 there will be two dates in the Council Year on which grants are considered. Your application needs to be submitted by the last day of August to be considered in September or by the last day of January to be considered in February.

CONTACT DETAILS
Name of organisation
Contact person for this application:
Position e.g. Chair, Secretary, Treasurer:
Correspondence address:
Email address:
Telephone numbers:

TYPE OF COMMUNITY GRANT APPLIED FOR

If you are unsure, please tick any that might apply, and our clerk will consider which Committee the application should be considered by.

Community Assets

Community Services

Community Events or Projects

What will your grant pay for?

ABOUT YOUR GROUP	
What type of group are you?	<ul style="list-style-type: none"> • Unregistered community group • Registered charity • Other (please state):
Charity registration no. (if applicable)	
When did the group start?	
Do you have a constitution or a set of governing rules?	<p>Yes / No</p> <p><i>If yes, please provide copy with this application</i></p> <p><i>If no, please explain your management structure on a separate sheet.</i></p>
What area does your group cover? <i>The Council can only fund grants to groups which directly benefit residents of the Holme Valley</i>	
Describe the people you <u>mainly</u> work with:	<ul style="list-style-type: none"> • Children under 16 • Young people under 25 • Older people over 60 • People with disabilities • People of minority ethnic origin • Other groups (please state):
How many people are involved in running your group?	Paid staff:
	Volunteers, including Committee members:

FINANCES	
Financial year	
Income	£
Expenditure	£
Reserves	£
Please describe your current financial reserves and account for expected expenditure from these.	
Has the group previously received a grant from the Parish Council?	<p>Yes / No</p> <p><i>If 'Yes' please give the date and brief details of any grants received in the last five years.</i></p>

YOUR PROJECT			
How much money are you requesting from the Parish Council?		£	
Project start date:		Project end date:	
<p>Please describe what you want to do with the money. Use no more than 500 words. Please answer the following questions in your answer:</p> <ul style="list-style-type: none"> • Who will benefit from this project? • How do you know there is a need for this project? • Are you working in partnership with other groups? • How many people are involved in your activities each year? • How will you know that the project is a success? 			

PROJECT BUDGET		
Item	Total cost	Requested from the Parish Council
	£	£
TOTALS	£	£

OTHER FUNDING
<p>Has the group applied elsewhere for other grants to fund this project?</p> <p>Yes / No</p> <p><i>If yes, please give details below. Include date of application, amount requested and the outcome (if known).</i></p>
<p>Other sources of funding for this project, e.g. donations, reserves, fund raising. Please list, with amounts.</p>

BANK ACCOUNT DETAILS	
Account name	
Sort code	
Account number	

Declaration

This declaration must be signed by an authorised person, eg Committee Member, Office Holder or Trustee.

- I am authorised to make the application on behalf of the above organisation.
- I have read and noted the Council's criteria relating to this application and agree to abide by the conditions listed if a grant is awarded.
- I certify that the information contained in this application is correct.
- If the information in the application changes, I will inform the Council.
- I give permission for the Council to record the details of my group electronically and to contact us by phone, mail or email regarding this application.
- If the application is successful, I give permission for the Council to publicise the project in the local media and on its website.
- I agree to provide a report, including photographs, to the Council, indicating how the grant awarded has been spent, within two months of completion.

Name:

Signature:

Date:

Name of Organisation	
CHECKLIST	
Please enclose the following with your application	
	Please Tick
Signed application form, with every question answered	
Have you addressed sustainability issues? See the criteria on the council website (section 1.8).	
Last three years audited annual accounts (if available)	
Constitution or set of rules (if not applicable please state so)	
Copy of bank statements for past six months	
Copies of written estimates/quotations for capital purchases?	
For projects or items over £5000 have you completed a Business Plan or for grants over £2.000 have you provided a forward plan of activities for the next year ?	
If possible, please email a copy of the grant application to the Clerk (clerk@holmevalleyparishcouncil.gov.uk). With the Application in WORD not PDF.	
and send completed application form (with all supporting documentation) to: Holme Valley Parish Council, Holmfirth Civic Hall, Huddersfield Road Holmfirth, HD9 3AS	
If you have any queries, please contact the Clerk - Tel: 01484 687460 Email: clerk@holmevalleyparishcouncil.gov.uk	
<i>You are advised to keep a copy of this application for your own records.</i>	
For internal admin use only:	
Date application received:	
Application meets criteria:	Yes/No*
Meeting Date/Minute No.	
Grant approved . Yes/No	
Legislation under which grant is made.	
Date applicant notified of outcome:	