**Kirkcaldy Area Local Community Planning Budget Application Form**

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| **The Local Community Planning Budget supports local projects and initiatives in partnership with community partners, voluntary organisations, Fife Council Services and external partners**  |

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| **For office Use only**Project Reference: |  |
| Amount Approved: | £ |
| Funding Awards up to £5000 | Date Approved at Ward Meeting | Date if Delegated Approval  |
| Funding Awards over £5000 | Date approved at Area Committee |  |
| Signed | Locality SupportTeam Leader: | Date: |

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| **1.** | What is the title of your project? |
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| **2.** | What is your organisation’s name and address? |
|  | Name |  |
|  | Address | This address will be used for any correspondence |
| **3.** | Who is the main contact for this application? |
|  | Name |  |
|  | Position in Organisation |  |
|  | Address (if different from above) |  |
|  | Contact Telephone Number |  |
|  | Email address |  |

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| **4.** | What project or activities do you want us to fund? (Max. 250 words) Please be specific about:* What you will do
* How you will do it
* What you will spend the monies on
* How you identified the need
* How many people it will help
* Please state if you are seeking funding over more than one financial year and provide full details.
* How your project meets the Area’s Local Community Planning priorities

Please refer to the Area’s priorities listed on page 5 |
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| **5.** | When will your project or activities take place? |
|  | Start Date(Month and Year) |  | End Date(Month and Year) |  |
|  |  |  |
| **6.** | How much will your total project or activities cost? |
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| **7.** | How much will each item or activity cost?*Include all costs connected to running the project.* |
|  | **Item or Activity** | **Cost(£)** |
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|  | **Total** |  |
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| **8.** | How much are you requesting from the Local Community Planning Budget? |
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| **9.****10.**  | How much is your Service or organisation contributing to the project/these activities?Are you applying to any other funder for this project / these activities? If yes, please list details below. |
|  | **Source of Funding** | **Amount****£** | **Is this secured? (please provide proof)** | **If not, when will this be secured?** | **Can your project go ahead without this?** |
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| **11** | **To be completed by Voluntary and Community Organisations only** |
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| 11.1 | Do you have a written governing document e.g. a constitution, a set of rules or trust deed? | No |  | Yes |  |
|  |  |  |
| 11.2 | How many people are on your organisation’s management committee? |  |
| 11.3 | Please provide details of the bank account into which we would pay the money |
|  | Name of Bank |  |
|  |  |  |
|  | Account Name |  |
|  |  |  |
|  | Sort Code |  | Account No. |  |
|  | Building Society Roll Ref.  |  |
| 11.4 | Has your organisation applied to the Local Community Planning Budget within the last three years? If yes, please provide details | No |  | Yes |  |
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|  | Project | Date | Amount Received |
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| **12.** | **To be completed by Public Bodies only** |
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| 12.1 | Name of Public Body or if Fife Council please also state your Service |
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|  |  |  |
| 12.2 | If Fife Council please provide details of full financial code (36 digits) or if other Public Body please provide bank details to pay money |
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**Please note that decisions on funding can take up to 3 months, longer in exceptional cases**

**Kirkcaldy Local Community Planning Applications**

**Criteria**

Please tick the criteria which your project meets:

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| **Improving Economy, Employment and Learning Opportunities*** Young people access employment or training
* Unemployed people have opportunities and support to access and sustain education, training and employment
* Increase peoples employability/training opportunities
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| **Improving Outcomes for Families, Early Years and Young People*** There is a network of family activities and family centre provision throughout the Kirkcaldy Area
* There are improved health outcomes for families and children
* Education attainment has improved by S4
* Increase access to services which provide family support and help for early years
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| **Improving Health and Wellbeing*** Improve health outcomes for vulnerable pregnant women, children, young people and families.
* People are supported to improve their health and wellbeing
* Services and support are delivered in ways that meet the needs of different communities, neighbourhoods and equality groups
* More people participating in sport and active leisure
* Develop and promote healthy eating and lifestyles
* Improving health, wellbeing and care of vulnerable adults/older people
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| **Promoting Neighbourhood Development and Increasing Neighbourhood Pride*** Develop activities that encourage active community participation
* Communities are actively involved in the design, delivery and management of services
* Communities feel safe and secure living in their neighbourhoods
* Improving our Town Centres
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| **Improving Quality of Life in Local Communities, Building Community Capacity*** Improving Quality of Life in Local Communities
* Cleaner, safer streets
* Encouraging and supporting individuals and communities to address local needs
* Improved use of green space, land and buildings in communities
* More, better quality, and affordable housing
* Reducing antisocial behaviour
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**Terms and Conditions**

• Organisations must provide proof of match funding where applicable.

• The monies must only be used for the purpose stated above and approved by Fife Council. You must inform Fife Council immediately of any proposed changes to the project.

• The project must start on the agreed date or as soon as possible after that date. If the timescale of a project slips, Fife Council must be notified and a progress report submitted.

• The project must not start before the monies are awarded except in exceptional circumstances

• The applicant may not transfer any part of the monies to any other organisation or individual.

• No aspect of the activity being funded should be party political in intention, use or presentation.

• At the end of a project, or in any case where the organisation ceases to exist, or where there is a breach of conditions, any unspent monies or equipment purchased will be repaid/returned to Fife Council.

• Community Organisations are required to have a constitution or other appropriate governance. Organisations without such governance may apply, but no monies shall be paid out until a constitution/appropriate governance is in place.

• The whole amount of monies or part of that amount, at the discretion of the appropriate Council Committee, shall be repaid to Fife Council if any information given in connection with the application is found to be false or misleading, or fails to disclose a material fact bearing upon the consideration of the application.

• It is a requirement that an Evaluation/Monitoring Form is completed at the end of the project or after six months. Failure to do so may result in a request for the monies to be returned to Fife Council. Checks will also be carried out to ensure the monies were spent as stated in the application. Future applications will not be considered unless a satisfactory Evaluation/ Monitoring Form is received by Fife Council.

• The applicant/organisation shall agree to the organisation’s main contact details being publicly listed on the Fife Direct website.

• Any monies received from Fife Council should be acknowledged in the organisation’s publicity, reports and relevant communications.

• All organisations should ensure that in carrying out the activity for which the grant has been given that they shall not commit any act of discrimination rendered unlawful by the Equality Act 2010. In particular, they should ensure they are open to all who could benefit or wish to take part and have an equality of approach throughout project delivery.

• All organisations working with children, young people or vulnerable adults should ensure that in carrying out their activities, they meet the requirements of the Health and Safety at Work Act 1974 and the Protection of Children (Scotland) Act 2003. In particular for all activities involving children, young people and adults at risk, safeguarding policies and procedures should be in place, with staff and volunteers holding an appropriate PVG Certificate.

* Organisations who are applying for monies to hold events should ensure that they have public liability insurance and any other relevant permissions.

• The applicant may share information about our funding award with parties and anyone who may make a request for information under the Freedom of Information Act 2000.

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| ***To be completed by applicant*****I (the nominated applicant) have read and agree to comply with the Terms and Conditions and confirm the information given is correct.** |
| **Signed: Date:** |

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| You have answered all the relevant questions in this application |  |
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| You, the main contact named in Q.2 of this application form, is authorised to apply to the Local Community Planning Budget on behalf of your organisation. |  |
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| You have signed the Application Form (electronic signature will be accepted along with a confirmation email). |  |
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| You understand that if you make any seriously misleading statements (whether deliberate or accidental) at any stage during the application process, or knowingly withhold any information, this could make your application invalid and you could be liable to repay any funds to us. |  |
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| You are able to comply with the Local Community Planning Budget’s Terms & Conditions. |  |
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| If you are a community or voluntary organisation, you have enclosed a copy of your governing document  |  |
| and |  |
| a copy of your latest signed, audited/independently examined accounts (if you do not have signed audited accounts please provide an income and expenditure statement) |  |
| and |  |
| proof of funding from other sources if applicable |  |

**Before you submit your application, please complete the following checklist**

**You must be able to tick every box**

**The information included in this publication can be made available in any language, large print, Braille, audio CD/tape and British Sign Language interpretation on request by calling**

**03451 55 55 00 BT Text Direct 18001 01592 55 11 91**