

Go For It Grants

Bringing Good Ideas to Life.
Get Involved in Newham

Application Form



This form will be used to assess your application for a Go For It grant. It is essential that you read our guidance notes before completing this form. If you need help or advice to complete your form please contact us and we will be happy to help. Please complete all relevant sections to make sure your application is assessed as quickly as possible.

PLEASE NOTE: If the required documents are not attached, the assessment of your application will be delayed.

OFFICE USE ONLY

Ref: GFI _____

Request: £ _____

Please use **BLACK INK** to complete this form

PART A – ABOUT YOU, THE PERSON WE WILL CONTACT REGARDING THIS

Title Mr Mrs Ms Miss Dr Other

First name

Surname

Telephone no. Mobile

Email address (if you have one)

Postal address

..... Postcode

Name of group (if applicable)

Your position in group (if applicable)

If we need to contact you, are there any special communication requirements?

Yes No If yes, please specify

.....

PART B – ABOUT YOUR IDEA

PROJECT DETAILS

Name of your project

Please describe what you want to do.

.....

.....

.....

.....

.....

Where will the project/activity take place?

When will your project start?

Who will benefit from your project? Please give us some details about numbers of people taking part, age groups etc.

.....

.....

.....

BENEFITS OF YOUR PROJECT

Will your project help provide any of the following? Please tick as appropriate.

Environmental improvements Healthier population Bringing diverse communities together

Young people's activities A safer Newham New leisure activities

What will be the outcomes or impact of your project for local people?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

RESEARCH AND MARKETING

How do you know your project is needed?

.....

.....

.....

How will people find out about your project?

.....

.....

.....

MONITORING

How will you be able to show that your project is succeeding?

.....

.....

.....

PART C – DETAILS OF YOUR BUDGET

Please provide clear details on the costs of your project

PROJECT COSTS

(Please note the Go For It grants programme can only award small-scale one-off grants up to a maximum of £1,000, or £250 for applications from schools)

What amount are you requesting from the Go For It grants programme? £

Is this amount the full cost of your project? Yes No

If no, what is the full cost of the project? £

How much have you already raised? £

If there is any shortfall, how will you raise the rest of the money?

Have you approached another grant awarding body for this project? Yes No

If yes, what is the name of this grant awarding body?

What date do you expect to hear the outcome?

Will you be charging service users for your project? Yes No

If yes, please give details of proposed charges

.....

PROJECT COST BREAKDOWN

Please tell us how you plan to spend the Go For It grant. Please list in detail each item below. You will need to include an estimate or quote from your suppliers with your application form for any item on your list that exceeds £150, whether it's for staffing, services, equipment or any other costs. (please see page 7 of the guidance notes for an example).

ITEM	DETAILS	COST
TOTAL £		

GRANT PAYMENT ARRANGEMENTS FOR SUCCESSFUL APPLICATIONS

PLEASE NOTE WE ARE UNABLE TO ISSUE ANY PAYMENTS TO INDIVIDUALS.

Does your group have its own bank account? Yes* No**

If yes please give the authorised signatories for your bank account and what is their position in your group?

Signatory's name Position in group

Signatory's name Position in group

Signatory's name Position in group

If you do not have a bank/building society account in the name of your project or group, do you know of an organisation that would receive a grant on your behalf*?

Yes No

If yes, please give the organisation's name and phone number

Name

Phone

**** Please do not worry if you cannot identify an organisation that would assist in this way, we will make arrangements for payment if your application is successful.**

*** Please provide your groups or organisations bank/building society account details on letter headed paper.
See page 9 of the guidance notes.**

Informal groups of residents do not need to complete parts D and E. Please fill in and sign the declaration in part F and complete the checklist in Part G.

PART D – ABOUT YOUR GROUP

To be completed by constituted voluntary groups and organisations only.

Please describe who takes part in your group, what you do and the services you already provide.

.....
.....
.....

How do you promote equal opportunities and involve service users in the operation of your group and activities?

.....
.....
.....

What date did your group start?

In which part of Newham does your group work?

Is your group a registered charity? Yes No

If yes, what is your charity registration number?

Is your group a limited company by guarantee? Yes No

PART E – YOUR GROUP’S FINANCIAL INFORMATION

Your answers in this section will provide clear details of the financial situation of your group (if applicable).

GROUP’S FINANCES

Has your group produced annual accounts? Yes No

Are these accounts audited? Yes No

Does your group have any reserves? Yes No

If yes, please specify the amount £

Of these reserves, how much is restricted or unrestricted?

Restricted: £

Unrestricted: £

Have you received any funding from Newham Council in the last three years? Yes No

If yes, please give details

.....
.....

PART F – DECLARATION

This form must be signed by yourself or another member of your project organising group.

If you are applying on behalf of a voluntary group, a member of your management committee should sign this declaration, not a paid employee.

‘I hereby certify that the information contained in this application is correct and in accordance with the best information available to me, and I undertake to provide such additional information as Newham Council may require to consider or verify the application. I further confirm that if the application is successful, in full or in part, we will comply with the Go For It grants programme conditions of grant aid.’

Signature

Name in capitals

Position (if applicable)

Date

PLEASE NOTE

Information in this form will be used for assessment and monitoring purposes. Details will be recorded on a database, which will be shared with other officers in the council, and to gather general information that may be made public.

PART G - CHECKLIST

APPLICATIONS FROM INFORMAL GROUPS OF RESIDENTS

You must include the following documents with this application, where applicable. Please tick if enclosed

- Your project statement of aims and objectives, if not stated in your answers to part B
- Estimates or quotes for any items in budget exceeding £150 in value
- Names and addresses of project organisers (minimum of three Newham residents)
- If you are proposing to pay a trainer, instructor or other consultant, please enclose their CV as well as details of their proposed charges

APPLICATIONS FROM VOLUNTARY ORGANISATIONS

- Your rules or constitution
- Your latest annual accounts/financial statement
- Estimates or quotes for each item in budget exceeding £150 in value
- If you are proposing to pay a trainer, instructor or other consultant, please enclose their CV as well as details of their proposed charges
- Your equal opportunities statement
- Your child protection policy (where applicable)
- Names and addresses of your management committee members
- Your group/organisation's bank details on a sheet of headed paper (See page 9 of the guidance notes).

PLEASE NOTE: If your required documents are not attached, consideration of your application may be delayed beyond the eight week maximum timescale for decisions on Go For It Grant Applications.

PLEASE SEND YOUR COMPLETED APPLICATION TO:

**Go For It Grants, Leisure Services, Newham Dockside,
1000 Dockside Road, London E16 2QU**



If you would like to discuss this application or need any help with anything relating to Go For It grants programme please phone us on 020 3373 7511 or alternatively you can send an email to goforit@newham.gov.uk

**PLEASE SEND YOUR COMPLETED APPLICATION TO:
Go For It Grants, Leisure Services, Newham Dockside,
1000 Dockside Road, London E16 2QU**