

# East Ayrshire Council Grant Application Form



**For official use only**

Organisation

Date received

Reference number

**Six simple steps to completing your application.**

**Steps 1, 2, 4, 5, 6 must be completed by all applicants. Please tick boxes as you progress.**

**STEP 1** ☐ Read the guidance notes that accompany this form.

**STEP 2** ☐ Fill in pages 2 to 7 of the form to give information about your organisation, the grant you're applying for and your bank account details.

**STEP 3** ☐ Fill in supplementary childcare and staffing forms as required.

**STEP 4** ☐ Gather enclosure documents and fill in the checklist below.

## Enclosures Checklist

To ensure that the Council can consider your application please tick box to show what you have enclosed. Your application will not be processed if you fail to enclose/complete the items shown in bold type.

- |   |  |
|---|--|
| <input type="checkbox"/> a) Last audited financial statement (income and expenditure for a period of one year signed and certified by independent third party. New organisations should give an estimate of their first year's income and expenditure | <input type="checkbox"/> f) Letter of Representation (copy attached)   |
| OR  | <input type="checkbox"/> g) Supplementary forms (if applicable)  |
| <input type="checkbox"/> b) Interim financial statement up to time of application, if other than end of financial year signed by the Treasurer  | <input type="checkbox"/> h) Two quotes for goods or services of over £500 to be purchased by grant (if applicable). As part of the Love Local Campaign East Ayrshire Council encourages groups to use local suppliers, where possible. |
| <input type="checkbox"/> c) a copy of your Constitution (this is required for groups applying for the first time)   | <input type="checkbox"/> i) Names and addresses of office bearers.   |
| OR  | <input type="checkbox"/> j) A full list of the names and addresses of your members (where available)   |
| <input type="checkbox"/> d) confirmation that your Constitution has not changed since submission of your last application.  | <input type="checkbox"/> k) Names, addresses and position in organisation of all members authorised to make withdrawals from organisation's bank   |
| <input type="checkbox"/> e) A copy of your group's last 3 months bank statements  |  |

**STEP 5** ☐ Fill in the declaration below

**Declaration**  
On behalf of

Name of Organisation

I undertake to ensure that all the necessary enclosures are included, that the information is, to the best of my knowledge, accurate and that this application complies with East Ayrshire Council's conditions of grant.

Print Name

Date

**STEP 6** Send form supplementary pages and enclosures: Democratic Services Manager, East Ayrshire Council, Council Headquarters, London Road, Kilmarnock KA3 7BU or e-mail to [communitygrants@east-ayrshire.gov.uk](mailto:communitygrants@east-ayrshire.gov.uk)

**STEP 2**

# Your Organisation

<b>1</b>	<b>Please give the name of your organisation and the address for correspondence</b>
	<i>Name of organisation</i>
	<i>Address</i>
	<i>Postcode</i>
	<i>E-Mail</i>
<b>2</b>	<b>Please give the name, address, telephone number and position in organisation of the main contact person. (They must have a good knowledge of the organisation and this application).</b>
	<i>Name</i>
	<i>Position in organisation</i>
	<i>Address</i>
	<i>Postcode</i>
	<i>Telephone Numbers (daytime/evening/mobile)</i>
	<i>E-Mail</i>
<b>3</b>	<b>How many members does your organisation or group have?</b>
<b>4</b>	<b>What is the usual attendance at your organisation's meetings or events?</b>
<b>5</b>	<b>When and where does your organisation meet? (Please include date, time and venue)</b>
<b>6</b>	<b>Please list the geographic areas or communities that your organisation serves</b>
<b>7</b>	<b>Who can become a member of your organisation?</b>

**For information and advice on grants or your application call the Grants Information Line on 01563 576147**

<b>8</b>	<b><i>It is a condition of grant that organisations supported by the Council are open to all. If your organisation excludes anyone, please say who is excluded and why.</i></b>
<b>9</b>	<b><i>Please tell us how your organisation is managed. (For example, volunteers or paid staff)</i></b>
<b>10</b>	<b><i>What local or national affiliations does your organisation have?</i></b>
<b>11</b>	<b><i>What are the main aims and objectives of your organisation?</i></b>
<b>12</b>	<b><i>If you have to pay a letting or leasing charge in order to hold your organisation's meetings please tell us who the landlord is and what letting charges or leasing agreements are in place</i></b> Name and address of landlord  Postcode Length of lease/expiry date Letting charge or leasing agreements (Please specify per month/year)
<b>13</b>	<b><i>If your organisation is registered in terms of The Regulation of Care (Scotland) Act 2001, please give us your current registration number</i></b>
<b>14</b>	<b><i>If your organisation is a registered charity, please give us your current registration number</i></b>
<b>15</b>	<b><i>Does your organisation provide a service/activity for children, young people or vulnerable adults?</i></b> YES <input type="checkbox"/> NO <input type="checkbox"/>

*If yes, please refer to Step 3C on pages 11 & 12*

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# The Grant

16	<i>Please tell us what the grant is to be used for. Please give a breakdown of your project/event, outlining the objectives, benefits, dates and how its success would be measured.</i>

17	<i>Please tell us who will benefit from the grant</i>

18	<i>Total cost of project</i>	£
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19	<i>Please show the total contributions from other organisations (see question 23)</i>	£
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20	<i>What is the organisation's contribution to the costs?</i>	£
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21	<i>How much of a grant is requested?</i>	£
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22	<i>Please give a general breakdown of the total costs</i>	
		<b>Cost</b>
	<i>Total Cost</i>	£

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<b>23</b>	<b>What contributions to costs has your organisation either applied for or received from anybody else for this project?</b>			
	<b>Name of body</b>	<b>Amount</b>	<b>Successful</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Awaiting Decision</b>
	<b>Reason for Grant</b>			
	<b>Name of body</b>	<b>Amount</b>	<b>Successful</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Awaiting decision</b>
	<b>Reason for Grant</b>			
	<b>Name of body</b>	<b>Amount</b>	<b>Successful</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Awaiting decision</b>
	<b>Reason for Grant</b>			
	<b>Name of body</b>	<b>Amount</b>	<b>Successful</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Awaiting Decision</b>
<b>Reason for Grant</b>				

<b>24</b>	<b>Please give details of grants received from the Council and other bodies within the last 24 months.</b>		
	<b>Name of granting body</b>	<b>Amount of Grant</b>	<b>Date rec.</b>
	<b>Reason for Grant</b>		
	<b>Name of granting body</b>	<b>Amount of Grant</b>	<b>Date rec.</b>
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<b>25</b>	<i>Please tell us what advice you have taken or plan to take in the development or implementation of the project?</i>

<b>26</b>	<i>If this application relates to a playscheme, pre-5 childcare or out of school care please complete the supplementary form on childcare. Please tick box to show you have filled in supplementary form on childcare</i>	<input type="checkbox"/>
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<b>27</b>	<i>If this application relates to paid staff, please complete the supplementary form on staffing. Please tick box to show you have filled in the supplementary form on staffing.</i>	<input type="checkbox"/>
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<b>28</b>	<b>RISK MANAGEMENT ASSURANCE STATEMENT</b>
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The Council cannot assume the role of an insurance adviser or broker. It is the responsibility of the applicant to ensure that the risk(s) arising from the planned activity/activities is/are adequately assessed and that an appropriate level of insurance protection is arranged.

The Council recommends that applicants should seek professional insurance and risk management advice from a British Insurance Broking Association Member Company or from an Association of British Insurers Member Company.

Please complete the undernoted statement when you are satisfied that the risks have been considered and insurance cover arranged.

DECLARATION	
<b>PRINT NAME</b>	
<b>POSITION IN ORGANISATION</b>	
<b>DATE</b>	

### EAST AYRSHIRE 4 COMMUNITY

As part of its commitment to support and assist community groups, voluntary organisations, charities and social enterprises in search of external funding opportunities, East Ayrshire Council offers a **FREE** search service called East Ayrshire 4 Community.

Through the Council's website, access to a wide range of external funding opportunities and information, both local and national, will be provided.

'East Ayrshire 4 Funding' can be accessed at <http://www.idoxopen4community.co.uk/eastayrshire/> It provides a streamlined and cohesive approach to external funding and will enable groups to identify the best range of funders for their particular projects and initiatives. Information can then be downloaded and printed.

The Council's Community Investment Team can arrange information sessions on how to use East Ayrshire 4 Community. For further information contact the Team on 01563 553935 or e-mail [vibrantcommunities@east-ayrshire.gov.uk](mailto:vibrantcommunities@east-ayrshire.gov.uk)

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# Your Bank Details

<b>29</b>	<b>Please give details of your organisation's main bank account</b>
	Name of bank
	Address
	Title of bank account
	Account No <span style="float: right;">Sort code</span>

<b>30</b>	<b>Please give details of any other bank or building society accounts your organisation holds. (Please continue on a separate sheet if necessary)</b>
	Name of bank
	Address
	Title of bank account
	Account No <span style="float: right;">Sort code</span>

<b>31</b>	<b>Please give details of any cash you hold that is not in the bank accounts above</b>
	Amount
	Reason held

<b>32</b>	<b>Please give details of any other financial assets your organisation has (ie property and investments)</b>

<b>33</b>	<b>Please list all the people who are authorised to make withdrawal from these accounts. (Please continue on a separate sheet if necessary)</b>

<b>34</b>	<b>Please specify how your group will spend the funds presently shown in the bank statement(s) submitted with this application</b>

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## Reference

# Staffing Supplementary form

Page 8

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**STEP 3b**

# Childcare Supplementary form

<b>C1</b>	<b>Please give the average number of children attending each session. (A session is a morning, afternoon or evening)</b>	
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<b>C2</b>	<b>Does your project offer education opportunities to parents or does it enable parents to work/study? Please give details.</b>

<b>C3</b>	<b>What age range of children will benefit from the grant?</b>

<b>C4</b>	<b>How many hours per week will the project be open?</b>
	<b>Total Hours</b>

<b>C5</b>	<b>What will the project's usual opening hours be?</b>						
	<b>Mon</b>	<b>Tues</b>	<b>Wed</b>	<b>Thurs</b>	<b>Fri</b>	<b>Sat</b>	<b>Sun</b>
<b>Morning</b>	To	To	To	To	To	To	To
<b>Afternoon</b>	To	To	To	To	To	To	To
<b>Evening</b>	To	To	To	To	To	To	To

<b>C6</b>	<b>How many children with additional support needs does your group provide a service for?</b>

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<b>C7</b>	<b><i>Please list the activities for children that your organisation will provide</i></b>

<b>C8</b>	<b><i>On what basis do parents or users take part in the management of the project? Please give details including number of meetings per year</i></b>

<b>C9</b>	<b><i>If your project is a holiday playscheme, on what dates and time will the playscheme meet?</i></b>						
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<i>October</i>	<i>From</i>	<i>To</i>					

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### **CHILD PROTECTION ASSURANCE STATEMENT**

Please refer to the Guide to Grants for further information.

East Ayrshire Council recognises the importance of protecting children and young people and believes that the protection of children is everyone's responsibility particularly when ensuring their safety and protecting them from abuse.

As such we ask that all organisations applying for grant funding answer the following questions to detail their responsibilities and commitment to protecting children (see guidelines).

Please complete statement 1, 2 or 3.

1. We, (insert name of organisation) ..... have made the appropriate enquiries and confirm we have no child care positions in our organisation under the terms of the Protection of Children (Scotland) Act 2003.
2. We, (insert name of organisation) ..... have child care positions and are registered for Disclosure checks with
  - ☐ Umbrella organisation (insert name) .....
  - ☐ CRBS
  - ☐ Disclosure Scotland
3. We, (insert name of organisation) ..... have child care positions and are in the process of registering for Disclosure checks with
  - ☐ Umbrella organisation (insert name) .....
  - ☐ CRBS
  - ☐ Disclosure Scotland

We understand that all persons that are in a child care position, whether in a paid or voluntary capacity, should have an Enhanced Disclosure Scotland Check specific to the role/job they have in our organisation.

As we have individuals in childcare positions, we have the following supporting documentation (please tick box).

- ☐ Child Protection Policy which relates to the Protection of Children (Scotland) Act 2003 in relation to having Disclosure checks carried out and the responsibility of an organisation to make a referral to Scottish Ministers if the criteria is met.
- ☐ Code of Conduct

On behalf of ..... I certify that the above details are accurate and we understand our responsibilities in relation protecting children and ensuring their safety.

Print Name: .....

Position in Organisation: .....

Date: .....



**PROTECTION OF ADULTS AT RISK ASSURANCE STATEMENT**

It is the responsibility of the organisation to ensure that staff and volunteers who require to have a disclosure check have them carried out by the organisation.

Organisations who have staff or volunteers in a position where they have contact with adults at risk may require to have a disclosure check (see Guidance Notes page 9).

Please tick the appropriate box and sign the undernoted statement.

1. ☐ We have made enquiries and are satisfied that we have no positions of contact with adults at risk.
2. ☐ We have positions of contact with adults at risk and the appropriate Disclosure checks are carried out with:
  - ☐ Umbrella organisation (insert name) .....
  - ☐ CRBS
  - ☐ Disclosure Scotland
3. ☐ We have positions of contact with adults at risk and are in the process of registering for Disclosure checks with:
  - ☐ Umbrella organisation (insert name) .....
  - ☐ CRBS
  - ☐ Disclosure Scotland

On behalf of ..... (insert name of organisation), I certify that the above details are accurate and we understand our responsibilities in relation to protecting adults at risk.

Print Name: .....

Position in Organisation: .....

Date: .....

# Conditions of Grant

The following conditions apply to all East Ayrshire Council grants for voluntary organisations

1. Grant monies must be expended within a period (not normally exceeding 12 months) from the date of approval, unless the nature of the project or other circumstances warrant the payment over a longer period. Where this is the case applicants should request an extension of the period of the grant at the stage of accepting the conditions of grant and should indicate the reasons for the request. No guarantee can be given that any request for extension of the period will be granted. A progress report will normally be requested within 6 months.
2. Organisations must not be party political.
3. If the costs actually incurred in any project are less than the amount approved, the remainder of the grant must be returned to the Council. If a project costs less than the original estimates, savings shall be divided proportionally between the applicant and the Council unless otherwise agreed.
4. If actual expenditure exceeds the amount of grant, only the amount approved will be paid. The applicant may choose either to meet the balance or make a supplementary application for grant. There is, however, no guarantee that any supplementary application will be approved.
5. If a body that has received a grant is disbanded, then any goods, equipment or facilities purchased from the grant will revert to the Council. If the goods, equipment or facilities have been lost, stolen or damaged and not replaced all monies obtained from their insurance will revert to the Council.
6. You must use the grant for exactly the project you applied for. You cannot pay the grant to any other organisation. If you use the grant for other purposes or give or sell items bought with the grant to another owner, you will have to repay the grant to the Council.
7. Where it is intended that organisations dispose of equipment funded or supplied free of charge by East Ayrshire Council then notification of intention to dispose should be made to the sponsoring Department for consideration and approval. For information and advice call the helpline on 01563 576147.
8. Grants will be made wholly to the group making application and expended in accordance with grant conditions and must not be passed to a third party without the express approval of the Council.
9. Any equipment should be in the charge of a named person at a given address in secure premises and must be adequately insured and regularly maintained by a qualified person. Any equipment should be supplied by a bona fide supplier and should comply with all statutory obligations under all relevant Health and Safety legislation
10. If applicable, details of ongoing maintenance provision should be submitted and approved by the Council within three months of the grant award.
11. This grant has been awarded on the understanding that any planning permissions/ building warrants etc will be obtained. Applicants will be required to ensure that they meet all other statutory requirements. Evidence of compliance may be required before payment is made.
12. Where a project involves improvement of premises or requires possession of land, the applicant will require to be the owner or tenant (on a lease for five years or more) of the premises or land before a grant will be released.
13. If the project is one that involves and is dependent upon contribution from a number of bodies, payment of grant will

not be made until the Council is satisfied that such contributions are forthcoming.

14. The Council may require you to give due recognition of the Council's contribution in all publicity material.
15. All financial records in connection with any project that receives grant aid from the Council must be available for random inspection if required by an Officer of the Council or by the Council's Internal and External Auditors.
16. The Council will not accept liability for any damages or injuries associated with projects or equipment for which grant assistance has been given by the Council
17. The Council welcomes applications from religious organisations that want to carry out work in the community, but the Council does not normally fund projects or activities:
  - that are designed primarily to promote religion itself; or
  - where people must take part in religious services in order to benefit.
18. Voluntary organisations providing a service to children and young people under 18 years of age which are in receipt of a grant from the Council, must comply with the requirements of the Protection of Children (Scotland) Act 2003. Such organisations should be registered with Disclosure Scotland or affiliated to an umbrella organisation that is registered with Disclosure Scotland.
19. All organisations that provide a service to children and young people must have a Child Protection Policy. This policy should be brought to the attention of all staff and/or volunteers at least once a year.
20. No public monies disbursed by the Council, in the form of grants or otherwise, to any external body or organisation shall be expended by the recipient body or organisation in a

manner which would result in any payment being made for any purpose to any political party or any separate body, company or other legal entity subsidiary to, or otherwise associated with, any political party.