## A blue and red logo  AI-generated content may be incorrect.

GWENT POLICE & CRIME COMMISSIONER’S

COMMUNITY FUND APPLICATION FORM

## SECTION 1 – Main Applicant Details

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| --- | --- |
| Q1: Name of main contact |  |
| Q2: Main contacts phone number |  |
| Q3: Main contacts email address |  |
| Q4: Job title or role |  |

## SECTION 2 – Lead Organisation Details

|  |  |
| --- | --- |
| Q5: Name of organisation |  |
| Q6: Organisation phone number |  |
| Q7: Organisation Email address |  |
| Q8: Organisation’s registered address |  |
| Q9: Organisation website and/or social media pages |  |
| Q10: Registered charity and/or company number |  |

SECTION 3 – Governance and Finance

|  |  |
| --- | --- |
| Q11: Does your organisation have a governing document? E.g. constitution, memorandum of understanding etc. ***Please attach a copy to your submission*** | [ ]  Yes [ ]  No |
| Q12: Date / year organisation was set up |  |
| Q13: How many people are involved in running your organisation? E.g. trustees, staff, volunteers |  |
| Q14: How many signatories are needed to authorise payments from your bank account? *(please note as part of the criteria two signatories are required as a minimum)* |  |
| Q15 Does your organisation have recent signed and published accounts or an income and expenditure log? ***Please attach a copy to your submission***  | [ ]  Yes [ ]  No |
| Q16: Does your organisation have in place appropriate policies and procedures for financial controls and management? | [ ]  Yes [ ]  No |
| Q17: Have there been any significant financial changes or challenges for your organisation in the last three years? If yes, please provide details.  | [ ]  Yes [ ]  No |
| Q18: Have you ever had a grant agreement or contract terminated for default under the terms of the grant / contract agreement in the last three years? If yes, please provide the reason and details, including customer name and contact details.  | [ ]  Yes [ ]  No |
| Q19: Has your organisation met the terms of its banking facilities and loan agreements in the past year? **If no please provide details** | [ ]  Yes [ ]  No |
| Q20: Has your organisation met its obligation to pay its creditors within 30 days during the past year? **If no please provide details.**  | [ ]  Yes [ ]  No |

## SECTION 4 – Project Details and Activity

|  |  |
| --- | --- |
| Q21: Project name |  |
| Q22: Project start date |  | Q23: Project end date |  |
| Q24: Is this a new or continuing project?  |  [ ]  New [ ]  Continuing |
| Q25: How many people will directly benefit from your activity/service? |  |
| Q26: Please provide demographic details: e.g. male and/or female beneficiaries, age range of beneficiaries |  |
| Q27: Which local authority area(s) will the activity take place?  | [ ]  Blaenau Gwent [ ]  Caerphilly [ ]  Monmouthshire [ ]  Newport[ ]  Torfaen [ ]  Gwent wide/Pan Gwent |
| Q28: Please select **ONE** primary priority that your project is aiming to deliver against: | [ ]  Preventing Crime & ASB[ ]  Making Our Communities Safer[ ]  Protecting the Vulnerable[ ]  Putting Victims First[ ]  Reducing Reoffending  |
| Q29: Please select **THREE** outcomes your project will be aiming to achieve *(please note you will be asked to monitor and report progress against these outcomes in your monitoring and reporting of the grant)* | [ ]  Boosting Confidence, Self Esteem & Resilience[ ]  Improved Health & Wellbeing[ ]  Increased awareness of consequences of crime & ASB[ ]  Reduced involvement in crime or ASB[ ]  Greater awareness of rights, risks and protective behaviours[ ]  Better ability to cope and recover from harm[ ]  Motivating Positive Behaviour Change[ ]  Sustained engagement in education, training or employment[ ]  More inclusive, safer public spaces[ ]  Greater engagement in diversionary activities[ ]  Increased feelings of safety[ ]  Strengthening relationships and partnerships  |
| Q30: Provide a detailed description of the project / service you are requesting funding for, including:* What work / activity will be delivered?
* Where and when will it be delivered?
* How will service users be referred to and access your project / service?

***500 words max*** |  |
| Q31: Explain and evidence what issues / needs your project is seeking to address, please include: * What are the main needs / issues your beneficiaries face and how does this affect their lives? *E.g. poor mental health, substance misuse, lack of confidence, unhealthy relationships, feeling unsafe*.
* How do you know this / what evidence do you have?
* How have you involved the community in the development of this project?

 ***300 words max*** |  |

## SECTION 5 – Project Outcomes

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| --- | --- |
| Q32: How will you monitor, measure and evaluate the outcomes that you are achieving? (see Q29 for the outcomes you have selected)* How will performance indicators be selected?
* What tools will you use to collect the information and monitor performance against indicators?
* How will you collate and evaluate the information collected into your reports?

  ***300 words max*** |  |

## SECTION 6 – Management and Staffing

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| --- | --- |
| Q33: Provide an overview of how the project or service will be delivered and managed? * Provide a description of the roles and responsibilities of parties involved in delivery (staff and volunteers).
* Who will oversee the project to ensure it is delivering and risks are managed?

  ***300 words max*** |  |

## SECTION 7 – Budget and Risk

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| --- | --- |
| Q34: What is the total cost of your project/service? | £ |
| Q35: How much funding are you requesting from the OPCC? | £ |
| Q36: Please provide in the table below the expenditure you are applying for. If you would like your application to be considered for two or three year funding then please fill in the relevant columns below. |
| **Description** *(please itemise as appropriate e.g. specify equipment, volunteer costs, etc, please also add as many rows as needed)* | **Yr 1 (£)** | **Yr 2 (£)***(if appropriate)* | **Yr 3** *(£)**(if appropriate)* |
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|  |  |  |  |
|  **TOTAL**  | **£** | **£** | **£** |

|  |  |
| --- | --- |
| Q37: Detail any current major risks or issues identified in this project / service and / or organisation:* Describe the risk or issue and its likelihood and impact.
* What are the mitigating actions?
* How will the risk be monitored?

***300 words max*** |  |

## SECTION 8 – Equality and Welsh Language

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| --- |
| Q38: Explain what use will be made of the Welsh language as part of the activities to be funded, including in service delivery, marketing and communication of service. Please provide details of research or evidence, which has informed the level of service, which is proposed to be offered through the medium of Welsh. If no Welsh Language services are offered, please provide evidence demonstrating that beneficiaries do not want to use the Welsh Language. *The Welsh Language (Wales) Measure 2011 introduced standards relating to the Welsh language and the Compliance Notice issued by the Welsh Language Commissioner to the Police and Crime Commissioner provides the standards that the Commissioner is required to implement across the organisation****300 words max*** |
|  |
| Q39: Explain how you will ensure that everyone who could benefit from your project / service knows about it. How are they able to access it and / or get involved?* What are the main barriers that exist for members of the community with protected characteristics accessing your project / service?
* What have you done (or will you do) to help them overcome these barriers and access the project / service?

***300 words max*** |
|  |

## SECTION 9 – Sustainability and Exit Strategy

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| --- | --- |
| Q40: How will you ensure this project / service is sustainable after funding has ceased, or if the project / service will close how will you minimise the possible negative impact on beneficiaries?***300 words max*** |  |

## SECTION 10 – Supporting Documentation and Declaration

You must be able to submit the following supporting documents with your application, please check the box to confirm that you have included these with your application:

1. Organisations governing document(s), this could be a constitution or memorandum and articles of association [ ]
2. Organisations latest annual accounts or an income and expenditure log [ ]
3. An official document issued by your bank that confirms the name of the organisation’s bank account, sort code and account number (e.g. bank statement or paying in slip) [ ]

## SECTION 11 – References

Please provide contacts for two references of support who we may contact to confirm further details in regard to your application.

|  |
| --- |
| **Referee 1** |
| Name |  |
| Email Address |  |
| Phone Number |  |
| Capacity in which you know them, include organisation name and job title where appropriate |  |

|  |
| --- |
| **Referee 2** |
| Name |  |
| Email Address |  |
| Phone Number |  |
| Capacity in which you know them, include organisation name and job title where appropriate |  |

You may be required to produce additional documentation should your application be successful, these may include:

* Child Protection Policy and / or a policy for the Protection of Vulnerable Adults;
* Equal Opportunities Policy;
* Health and Safety Policy;
* Management Information Policy or equivalent that sets out how the organisation complies with the Data Protection Act 1998 and the UK-General Data Protection Regulation; and
* Insurance Policies including, Employers Liability, Public Liability, Professional Liability.

## **DECLARATION**

* I am authorised to submit this application on behalf of the organisation / activity.
* I certify that the information provided in this application and all supporting documentation is correct.
* I confirm that acceptance of funding offered will not result in duplicate funding in any aspect of the budget requested.
* If the information in the application changes in any way I will inform Gwent OPCC immediately.
* I give permission for Gwent OPCC to record the information in this form electronically and to contact my organisation by phone, mail or email with information about its activities and about funding opportunities; and
* I agree to participate in monitoring, auditing and evaluation related to this funding stream.

|  |  |
| --- | --- |
| Signed |  |
| Print Name |  |
| Date |  |
| Position in Organisation |  |

**Once complete please send the completed form for consideration to** **PCCFunding@gwent.police.uk**