**Sizewell C Community Fund**

 **Small Grants Programme**

**Section 1 - Your Organisation**

**Organisation Name and Address Details**

|  |  |
| --- | --- |
| Full legal name of your organisation, as it appears on your governing document |  |
| Any other operating or trading names that your organisation is known as (if applicable) |  |
| Address of your organisation |  |
| Building Name/Number and Street |  |
| Town/City  |  |
| Postcode  |  |
| Website |  |
| Telephone  |  |
| General/Office Email |  |

**Main Contact Person**

These are the details that will be used for correspondence purposes.

|  |  |
| --- | --- |
| Title |  |
| Forename(s) |  |
| Surname |  |
| Job title |  |
| Work/Office Phone |  |
| Mobile Phone |  |
| Email |  |

**What type of organisation are you?**

Select as many as appropriate

|  |  |
| --- | --- |
| Registered charity |  |
| Company limited by guarantee |  |
|  Unincorporated club or association |  |
|  Community interest company |  |
|  Charitable Incorporated Organisation |  |
|  VAT Registered |  |
|  Other |  |

**Organisation Start Date**

When was your organisation founded or registered?

|  |  |
| --- | --- |
| Month |  |
| Year |  |

Are you part of a larger regional or national organisation?

For example, are you a local branch/division of a national organisation?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**Aims & Purpose of the Organisation**

Please describe the overall aims and objectives of your organisation and the activities or services your organisation provides

* Up to 5 bullet points which summarise the aims and main activities of your organisation

|  |
| --- |
|  |

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**Organisation's Financial Information**

Please complete these based on your whole organisation's financial information

|  |  |
| --- | --- |
| Total Income over last financial year |  |
| Annual Expenditure over last financial year |  |
| What are your current Unrestricted Reserves? |  |

**Staffing and volunteers**

How many of each of the following are involved in the organisation?

|  |  |
| --- | --- |
| Full time staff / workers |  |
| Part time staff / workers |  |
| Management committee/trustees/directors |  |
| Volunteers (excluding management committee) |  |

**FIRST TIME APPLICANTS ONLY - Reference Details**

If your organisation has NOT previously received a grant from Suffolk Community Foundation, please provide details of an organisation we can approach for a reference for you. They must know your organisation well and have recently worked with you.

|  |  |
| --- | --- |
| Referee organisation or company name |  |
| Referee first name |  |
| Referee surname |  |
| Referee position or job title |  |
| Referee email |  |
| Referee phone number |  |

**Section 2 - Your Project**

|  |  |
| --- | --- |
| Project name |  |
| Which local authority will the activity take place in? | East Suffolk  |
| What is the postcode of where your project will take place? |  |
| Which areas (village, town, parish, road, estate) will the project benefit? |  |
| When will your project start? |  |
| When will your project end? (if applicable) |  |

**What IMPACTS or OPPORTUNITIES created by the construction of Sizewell C is your project or activity addressing?**

|  |
| --- |
|  |

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**What NEED or WANT have you identified in the community as a result of this impact or opportunity?**

|  |
| --- |
|  |

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**Tell us about the project or activity that you're seeking this grant funding for**

|  |
| --- |
|  |

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**COMMUNITY SUPPORT - Tell us how the community is supportive of, and is involved with, your project**

|  |
| --- |
|  |

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**Is this project already up and running?**

 Yes/No

**What will success look like for you project? Include 3 EXPECTED OUTCOMES for your project**

|  |
| --- |
|  |

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**List how you'll MEASURE YOUR SUCCESS against these 3 expected outcomes**

|  |
| --- |
|  |

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**What will happen to your project at the end of the grant period?**

|  |
| --- |
|   |

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**Section 3 - Impact**

**Which category best describes the impact your project will have?**

|  |  |
| --- | --- |
| Improve life skills, education, employability and enterprise |  |
| Promote reduction of isolation and disadvantage and access to local services |  |
| Connect people with the arts, culture and heritage Transform access to, and engagement with, the environment and public spaces  |  |
| Maximise ability to strengthen community cohesion and build social capacity |  |
| Advance people's physical and mental health, wellbeing and safety |  |

**Which theme best describes the impact your project will have**

|  |  |
| --- | --- |
| Develop life skills |  |
| Offer training and work opportunities |  |
| Encourage safety and resilience |  |
| Keep people safe and well |  |
| Help people to find and keep a home |  |
| Provide access to services in rural areas |  |
| Enable disabled people |  |
| Assist families in need |  |
| Bring people together |  |
| Promote access to arts, culture and nature  |  |

**Beneficiaries**

**How many people will directly benefit from this project or activity funding?**

Primary Beneficiary - Select a single option to represent the primary beneficiary group for this grant

|  |  |
| --- | --- |
| Black, Asian and minority ethnic |  |
| Carers |  |
| Children and young people |  |
| Ex-offenders/offenders/At risk of offending |  |
| Families/Parents/Lone parents |  |
| Homeless people |  |
| Lesbian, gay, bisexual and transgendered groups |  |
| Local residents |  |
| Long-term unemployed |  |
| Men |  |
| Not in education, employment and training (NEET 16-24)Older people |  |
| People with alcohol/drug addictions |  |
| People in care or suffering serious illness |  |
| People with learning difficulties |  |
| People with low skill levelsPeople with mental health issues |  |
| People with multiple disabilities |  |
| People with physical difficulties |  |
| People living in poverty |  |
| Refugees/asylum seekers /immigrants |  |
| Victims of crime/violence/abuse |  |
| Women  |  |

**Please list any other beneficiary groups who will benefit from your grant**

|  |  |
| --- | --- |
| Black, Asian and minority ethnic |  |
| Carers |  |
| Children and young people |  |
| Ex-offenders/offenders/At risk of offending |  |
| Families/Parents/Lone parents |  |
| Homeless people |  |
| Lesbian, gay, bisexual and transgendered groups |  |
| Local residents |  |
| Long-term unemployed |  |
| Men |  |
| Not in education, employment and training (NEET 16-24)Older people |  |
| People with alcohol/drug addictions |  |
| People in care or suffering serious illness |  |
| People with learning difficulties |  |
| People with low skill levelsPeople with mental health issues |  |
| People with multiple disabilities |  |
| People with physical difficulties |  |
| People living in poverty |  |
| Refugees/asylum seekers /immigrants |  |
| Victims of crime/violence/abuse |  |
| Women  |  |

**Ethnicity**

Primary ethnic group - select a single option to represent the primary ethnic group for this grant

|  |  |
| --- | --- |
| White |  |
| White British |  |
| White Irish |  |
| White East European |  |
| White Gypsies and Travellers |  |
| Other White |  |
| Mixed |  |
| Black Caribbean and White |  |
| Black African and White |  |
| Asian and White |  |
| Other Mixed Ethnicity |  |
| All ethnicities |  |
| Asian and Asian British |  |
| Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Other Asian |  |
| Black and Black British |  |
| Caribbean |  |
| African |  |
| Other Black |  |
| Chinese or other group |  |
| Chinese |  |
| Any other  |  |

 Please list any other ethnic groups who will benefit from your grant:

|  |  |
| --- | --- |
| White |  |
| White British |  |
| White Irish |  |
| White East European |  |
| White Gypsies and Travellers |  |
| Other White |  |
| Mixed |  |
| Black Caribbean and White |  |
| Black African and White |  |
| Asian and White |  |
| Other Mixed Ethnicity |  |
| All ethnicities |  |
| Asian and Asian British |  |
| Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Other Asian |  |
| Black and Black British |  |
| Caribbean |  |
| African |  |
| Other Black |  |
| Chinese or other group |  |
| Chinese |  |
| Any other  |  |

**Issues**

Primary issue - select a single option to represent the primary issue that will be addressed by this grant

|  |  |
| --- | --- |
| Arts, culture and heritage |  |
| Anti-social behaviour |  |
| Bullying |  |
| Caring responsibilities |  |
| Stronger communities/Community support and development Counselling/Advice/Mentoring |  |
| Crime and safety |  |
| Disability and access issues Domestic violence |  |
| Economy |  |
| Education, learning and training |  |
| Employment and labour |  |
| Emergency/Rescue services |  |
| Environment and improving surroundings |  |
| Financial exclusion and financial illiteracy Gangs |  |
| IT / Technology |  |
| Harmful practice |  |
| Health, wellbeing and serious illness |  |
| Homelessness Housing |  |
| Language, culture and racial integration |  |
| Mental health |  |
| Offending/At risk of offending |  |
| Poverty and disadvantage |  |
| Refugees/Asylum/Immigration |  |
| Religion |  |
| Renewable energies and recycling |  |
| Rural issues |  |
| Sexual abuse |  |
| Social inclusion and fairness |  |
| Sport and recreation |  |
| Stigma/Discrimination |  |
| Substance abuse and addiction Supporting family life |  |
| Violence and Exploitation  |  |

Please list any other issues that will be addressed by this grant

|  |  |
| --- | --- |
| Arts, culture and heritage |  |
| Anti-social behaviour |  |
| Bullying |  |
| Caring responsibilities |  |
| Stronger communities/Community support and development Counselling/Advice/Mentoring |  |
| Crime and safety |  |
| Disability and access issues Domestic violence |  |
| Economy |  |
| Education, learning and training |  |
| Employment and labour |  |
| Emergency/Rescue services |  |
| Environment and improving surroundings |  |
| Financial exclusion and financial illiteracy Gangs |  |
| IT / Technology |  |
| Harmful practice |  |
| Health, wellbeing and serious illness |  |
| Homelessness Housing |  |
| Language, culture and racial integration |  |
| Mental health |  |
| Offending/At risk of offending |  |
| Poverty and disadvantage |  |
| Refugees/Asylum/Immigration |  |
| Religion |  |
| Renewable energies and recycling |  |
| Rural issues |  |
| Sexual abuse |  |
| Social inclusion and fairness |  |
| Sport and recreation |  |
| Stigma/Discrimination |  |
| Substance abuse and addiction Supporting family life |  |
| Violence and Exploitation  |  |

**Please indicate the primary age group that will benefit from this grant**

|  |  |
| --- | --- |
| Early years (0-4) |  |
| Children (5-12) |  |
| Young people (13-18) |  |
| Young adults (19-25) |  |
| Adults (26-65) |  |
| Seniors (65+) |  |
| All ages  |  |

Please list any other applicable age groups for your grant.

|  |  |
| --- | --- |
| Early years (0-4) |  |
| Children (5-12) |  |
| Young people (13-18) |  |
| Young adults (19-25) |  |
| Adults (26-65) |  |
| Seniors (65+) |  |
| All ages  |  |

**Section 4 - Project Budget, Supporting Documents and Declaration**

**Project Budget**

|  |  |
| --- | --- |
| Is your organisation registered for VAT? Yes - Only include VAT in your project costs below if you CANNOT claim it back from HMRC. |  |
| What is the total cost of the project? |  |
| How much has been raised so far? |  |
| Please give details of where the funding raised so far has come from, if applicable |  |
| How much are you applying to us for, in total? |  |
|  Are you in the process of applying for other funding for this project? | Yes/No  |
| * Please provide details of the other funding you are seeking, if applicable
 |  |
|  |  |

**MULTI-YEAR FUNDING REQUESTS ONLY - Year 1, 2, and 3 Costs**

Please break down the total amount you're asking us for, by year. If you're not seeking multi-year funding, you can leave this section blank

|  |  |
| --- | --- |
| Year 1 - amount applied for |  |
| Year 2 - amount applied for |  |
| Year 3 - amount applied for (if applicable) |  |

**Bank Details**

Please provide your organisation's bank account details, we'll pay your grant award to this account

|  |  |
| --- | --- |
| Account holder's name |  |
| Bank name |  |
| Bank sort code  |  |
| Bank account number |  |
| Please tick if your organisation's bank account requires 2 signatories to authorise every withdrawal, including for online banking |  |
| Names of signatories and their home postcodes |  |

**Any other information**

Is there anything else you'd like to tell us about your application?

|  |
| --- |
|  |

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**How did you find the application form?**

|  |  |
| --- | --- |
| Easy to complete no problems |  |
| Had some difficulty with some questions |  |
| Found very hard to complete |  |

**Supporting Documents**

| Please attach [the following documents](https://www.suffolkcf.org.uk/wp-content/uploads/2024/08/List-of-Supporting-Documents-Sizewell-C-Community-Fund.pdf) to your application using the 'Attachments' button at the bottom of this page. We will not be able to process your application until all these documents are received. If you have sent these to us within the last year, there is no need to supply them again unless they have been updated. We always need a copy of your latest accounts. Only one document can be attached to each section. Please email any additional documents to sizewellc@suffolkcf.org.uk  |
| --- |
| No. | Document | Requirements | Age | Applicable to |
| 1. | Governing Document | * At least 3 unrelated trustees or directors, living at different addresses
* Aims and objectives that match with project or activity that funding is being requested for
* Dissolution/winding-up – assets must go to a similar organisation, and not shared between members/shareholders
* For CICs, Articles of Association should contain a named Asset Lock
 | N/a | Everyone |
| 2. | Annual Accounts | * Solvent
* Unrestricted reserves usually less than 12 months operating costs (contact us to discuss if this isn’t the case)
 | Last published accounts for financial year | Everyone(unless new organisation less than 18 months old) |
| 3. | Management Accounts | * Covering period between last set of accounts to now
* Full breakdown of income, expenditure and reserves and expected cashflow for remainder of current financial year
 | Within last 1 month | Only if Annual Accounts are older than 6 months |
| 4. | Bank Statement(or Paying-in Slip) | * Sort-code and account number shown must match the details entered in this application
* Name and address shown matches registered company/charity details and those entered in this application
 | Within last 3 months | Everyone |
| 5. | Safeguarding Adults at Risk Policy & Procedure | * Designated Safeguarding Lead(s) (DSL) contact names and telephone numbers
* Types of abuse
* Signs of abuse
* How to report concerns
* Safe recruitment practices/policy
* Staff and volunteer training
 | Within last 3 years (and not overdue for review) | Everyone(can be combined Adults and Child policy) |
| 6. | Safeguarding Children Policy & Procedure | * Designated Safeguarding Lead(s) (DSL) contact names and telephone numbers
* Types of abuse
* Signs of abuse
* How to report concerns
* Safe recruitment practices/policy
* Staff and volunteer training
 | Within last 3 years (and not overdue for review) | Everyone(can be combined Adults and Child policy) |
| 7. | Equality, Diversity and Inclusion Policy | * Set out your mission/commitment to build an inclusive, diverse and equitable organisation
* Actions and initiatives to achieve this
* Types of discrimination
* How to report concerns - from public and staff/volunteers
* Staff and volunteer recruitment practices/policy
* Staff and volunteer training
 | Within last 3 years(and not overdue for review) | Everyone |
| 8. | Public Liability Insurance Certificate | * Minimum cover of £10m
 | Within last 12 months | Everyone |
| 9. | Employers Liability Insurance Certificate | * Minimum cover of £10m
 | Within last 12 months | Everyone |
| 10. | Project Budget | * Complete our [template spreadsheet](https://www.suffolkcf.org.uk/wp-content/uploads/2024/08/Budget-Template.xlsx)
 | - | Everyone |
| 11. | Your Organisation's Logo | * Jpeg or Png format
* Minimum 300 dpi resolution (print quality)
 |   | Everyone |

**Declaration**

**Authority**

I confirm that I have been authorised by the governing body of my organisation (the board or committee that runs my organisation) to make this application.

**Terms and Conditions - the Sizewell C Community Fund**

I confirm that I have fully read and accept Suffolk Community Foundation's [Terms & Conditions for the Sizewell C Community Fund](https://www.suffolkcf.org.uk/wp-content/uploads/2024/07/Terms-Conditions-Sizewell-C-Community-Fund.pdf). I confirm that I am authorised to accept these terms and conditions on behalf of the organisation I am applying for.

**Accuracy of Information**

I confirm that the information contained in this application is correct. I understand that any incorrect, incomplete, or misleading information provided may result in Suffolk Community Foundation taking action to recover any money awarded, and may lead to the refusal of any future grant application.

**Use of my organisation's logo**

I consent to Suffolk Community Foundation and Sizewell C using my organisation's logo on their websites, social media and in print when publicising grants awarded, if my application is successful.

**Consent to share information**

I consent to Suffolk Community Foundation making enquiries, and sharing information with, relevant organisations or individuals as part of the Foundation's due diligence process, in relation to this application.

Yes, I confirm that I am have read and agree to the above declaration

Optional - Share Details with other Funders

Yes, I consent to sharing details of my application with other funds/grant programmes held by Suffolk Community Foundation which may help secure additional/alternative grant funding

Confirm - your full name

|  |
| --- |
|  |

Confirm - your role/position

|  |
| --- |
|   |