



Reference no.:
For office use only

**Targeted Support Fund** programme 2009  
**Application form for grants from £10,000 to £40,000**

If you need help and advice, please contact us on 01952 291350 or email us at [ellasips@tandwcvcs.org.uk](mailto:ellasips@tandwcvcs.org.uk)

**1. Name of organisation**

**2. Full address of organisation (for correspondence).**

Postcode:
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**3. Contact details.**

**Main contact person**

**Second contact person**

Title: (please circle)	Title: (please circle)
Name:	Name:
Position:	Position:
Telephone:	Telephone:
Mobile phone:	Mobile phone:
E-mail:	E-mail:

**4. Which theme of the Targeted Support Fund do your services currently address?**

**Please select ONE only:**

- Information, Advice and Guidance
- Employment & employability
- Health & wellbeing

**Please refer to the Guidance notes to see what is included in these themes.**

**5. Please give a description of up to 250 words about your organisation; this should outline who you are, what you do, and who you help.**

(Please note if you are selected for a grant, we might use this information in publicity material including publishing it on the OTS website.)

**6. When did your organisation start?**

**7. Are you:**

A third sector organisation?

A voluntary organisation?

A registered Charity?

Charity number

A social enterprise?

Co-operative or mutual?

Other (please state)

If you are a company registered at Companies House, please enter the number:

**8. Do you have appropriate accreditation and insurance to provide the services this grant will fund?**

Yes / No
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If yes, please attach a copy of the relevant documentation.

**9. Are you:** (\*Please delete as appropriate)  
A locally managed organisation?

Yes / No*
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**10. How many people work for your organisation?**

Total number of paid staff/workers

Total paid hours per week

Total number of volunteers

Total volunteer hours per week


**11. How much has your annual income and expenditure been in the past 3 years?**

Financial Year	Or state your own financial period	Annual income	Annual expenditure
2008-09 (please include estimates where final accounts are not yet available)		£	£
2007-08		£	£
2006-07		£	£
2005-06		£	£

**Targeted Support Fund can only fund organizations in a robust and stable financial position, as demonstrated by accounts.**

**Please tick here to confirm that you have included your most recent set of annual accounts approved by an auditor (or an independent examiner where allowed by charity law)?**

Yes	
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**12. Please provide a brief explanation of how demand for your services has increased as a result of the economic downturn?**

**13. Please give a brief description of how you will use the grant – use up to 150 words to describe your project.**

(We reserve the right to use this information in publicity material, including publishing it on the OTS website)

**14. Which area of Telford and Wrekin (e.g. town, village, Borough) do you work in? In particular, please indicate in which areas the funding applied for will have the greatest impact.**

**15. Who will benefit from your project?** Please tick as many boxes as apply.

Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
People on low income	<input type="checkbox"/>	Unemployed people	<input type="checkbox"/>
Young people 0-25 years	<input type="checkbox"/>	Older people	<input type="checkbox"/>
Singles	<input type="checkbox"/>	Families	<input type="checkbox"/>
Refugees	<input type="checkbox"/>	Disabled people	<input type="checkbox"/>
People living in rural areas	<input type="checkbox"/>	People living in urban areas	<input type="checkbox"/>
Other (Please describe)	<input type="text"/>		

**16. Please tell us which ethnic groups your organization benefits by ticking the appropriate boxes in the tables below:**

Bangladeshi	<input type="checkbox"/>	African	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Other Black	<input type="checkbox"/>
Other Asian	<input type="checkbox"/>	British	<input type="checkbox"/>
Asian and White	<input type="checkbox"/>	European	<input type="checkbox"/>
Black African and White	<input type="checkbox"/>	Other White	<input type="checkbox"/>
Black Caribbean and White	<input type="checkbox"/>	Gypsies and Travellers	<input type="checkbox"/>
Other Dual Ethnicity	<input type="checkbox"/>		<input type="checkbox"/>
Other (Please describe)	<input type="text"/>		

**17. Approximately how many people will benefit from this grant?**

**18. Have you, or are you applying to more than one Local Funder for Targeted Support Fund?** (\*Please delete as appropriate)

If yes, to which Local Funder?

**19. How much money are you applying for?**

£

**20. Is this money for new work, or to continue funding existing work? (Please tick the relevant box)**

For new work

For existing work

## 21. Your project's budget

Please provide details of costs for your project.

**Please show basis of all calculations.**

**Enclose a supplementary sheet if needed**

Type of cost	Description of cost	Total cost £ (incl. VAT)
<b>Staff and volunteer costs</b> (for staff salaries – give headcount, rate of pay, period covered, and employer costs)		
<b>Organisation overheads (e.g. premises, utilities, governance, management)</b> (apportionment may be appropriate)		
<b>Service delivery costs (e.g. events, marketing, travel)</b>		
<b>Capital costs</b> (equipment cannot be the entire or main part of your budget)		
<b>Total</b>		

## 22. Bank Details

Account Name:

Bank / Building Society:

Bank / Building Society address:

Sort Code:

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Account No

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### 23. Equalities Information

(this information is not used in the assessment of your application but is used to ensure the programme meets Equalities legislation and duties on gender identity, ethnicity, sexual orientation, age and disability)

**Please tick Yes to confirm that your organisation will not discriminate in any aspect of your work on the grounds of age, disability, ethnicity, gender or gender identity, race, religion and/or sexual orientation.**

Yes	
No	

**Please confirm that your organisation complies with all legislative duties related to equality and diversity.**

Yes	
No	

### 24. Declaration

We agree to abide by the terms and conditions of the grant as they are set out in this application form and in the accompanying guidance, and understand that any offer of a grant will be subject to our proposed work remaining within grant criteria. We agree to participate in monitoring, auditing and evaluation related to this fund.

If the application is successful, details of the award will be published on CVS's own website and/or an OTS linked website.

Our signatures confirm our acceptance of these conditions.

#### Signatures of applicants

##### Organisation Chair or Secretary

Signature  
*please sign*

Name  
*please print or type*


##### Committee member

Signature  
*please sign*

Name  
*please print or type*


#### Telford and Wrekin CVS is registered to hold data under the Data Protection Act 1998

#### The Freedom of Information Act 2000

The Freedom of Information Act gives members of the public the right to request any information that we hold. Where can third parties get information about your project/organisation? (For example, your website)

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**Checklist, have you enclosed:**

- This signed and completed application form?
- Any additional papers you used to answer the questions above?
- Your constitution?
- Your last set of annual accounts
- Evidence of income over last 3 years.
- Latest bank statement


**What next?**

Please ensure that you have completed all sections of the application form, have the enclosures ready (see the above checklist) and then send to:

**Ella Sips  
Telford and Wrekin CVS  
Meeting Point House  
Southwater Square  
Town Centre, Telford  
Shropshire TF3 4HS**