

**ROTHER VALLEY WEST DEVOLVED REVENUE BUDGET 2016/17
APPLICATION FORM**

ABOUT YOU/YOUR ORGANISATION

Question One	
Name of organisation	
Project Contact Name & Role	
Address	
Telephone Number	
Fax Number	
Email Address	
Charity Number (if applicable)	
VAT Registration Number (if applicable)	

Question Two - Bank Details			
Account Name			
Account Number			
Sort Code			
Name and address of bank / Building Society			
Name of signatories	1	Project Role	
	2	Project Role	
	3	Project Role	
	4	Project Role	
How many people must sign cheques / withdrawals			

ABOUT YOUR PROJECT

Question Three	
Please indicate which Theme link / Neighbourhood priorities that your project will support (please tick✓)	
VISION FOR ROTHERHAM PRIORITIES	
1. Every Child makes the best start in life.	

2. Every Adult is secure responsible and empowered	
3. We have a strong community in a clean, safe environment	
4. We extend opportunity, prosperity and plan for the future.	
ROTHERHAM TOGETHER PARTNERSHIP'S PRIORITIES	
<i>Let's Get Rotherham Cleaning</i> Creating welcoming places through public realm works, parking schemes, highways improvements, and community led environmental initiatives such as skip days and litter picking by volunteers	
<i>Let's Get Rotherham Talking</i> Bring people together and prevent social isolation	
<i>Let's Get Rotherham Working</i> <i>Promote opportunity and equality – including supporting training and encourage volunteering</i>	

Question Four
Please state what your project would be called

Question Five	
What time period would you require the funding to run from and to (Note – your project must be complete and claimed by 31 March 2017)	
Start Date	
End Date	

Question Six
Who will be responsible for the monitoring of the project

Question Seven
Please provide a brief summary of the project proposal

Question Eight

Clearly explain what your project will achieve and how it will make a difference (include how many volunteers/ residents/ business/ organisations will benefit).

Question Nine

Please tell us of any community consultation undertaken in developing this project proposal

Question Ten

How will people be made aware of the project, progress and how it has made a difference?

Question Eleven

Please provide a list of potential risks that might affect the delivery of the project. For every risk identified please explain what actions you would take to manage or reduce that risk.

Risk	Action to reduce risk

FINANCIAL INFORMATION

Question Twelve	
Budget breakdown	
Total cost of whole project – please explain what is included in the costings.	£
How much money is needed? Please explain what the monies requested will fund?	£

Question Thirteen	
Please give us details of what you will contribute to your project volunteer hours, gifts in kind, cash donations, and other in-kind value: e.g. value of other items or resources given for free.	
Volunteer hours (use notional £11.00 per hour)	£
Value of items and resources, for example, room hire or equipment) given for free. (If your application is successful you will be required to provide an itemised list).	£
Cash donations	£
Match funding from another source	£
Total	£

Declaration

I declare that the information given in this application is accurate and to the best of my knowledge. On behalf of the group I agree to provide details of how this grant has been used, with invoices and/or receipts within 1 month of completion of the project.

Signed..... Date.....

Name.....

Position/Role.....

Contact telephone number/s and email.

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**Please return to RVW Area Assembly Team, 2nd Floor, Aston Customer Service Centre, Worksop Road, Swallownest, Sheffield S26 4WD or email mandy.ardron@rotherham.gov.uk
All completed application forms to be returned by 26th August 2016**