**Grant Application**

**Good Neighbour Scheme Development Grant Fund 2018**

**Good Neighbour Schemes (GNS)** contribute to the development of neighbourhood level asset-based community initiatives, in order to support older and disabled people with social care and support needs, and build community resilience so that people are enabled to rely less on formal care and support services, and are prevented from accessing services for longer.

Volunteer led Good Neighbour schemes are developed as part of community-based networks. There are currently over 30 schemes already up and running in East Sussex. Once established, Good Neighbour Schemes receive Adult Social Care and Health referrals to provide the following basic levels of support (in accordance with the persons assessed needs) i.e.:

* Popping in to check everything is ok
* Assistance with shopping or ordering shopping, and putting things away
* Providing assistance with odd jobs as they arise
* Occasional visits to local community centres, clubs or mainstream activities and services – i.e. the local pub, Garden Centre etc.
* Information about and introductions to other local groups and social clubs of interest
* Introductions to other members of the community
* Accompanying on trips to hospital and other appointments, e.g. transport through volunteer car schemes

East Sussex County Council is **offering grants of up to £500** (five hundred pounds) to new and existing Good Neighbour Scheme groups with an income of up to £50,000 (fifty thousand pounds) to support activities that either:

1. Support an established Good Neighbour Scheme to develop, either through expanding or ensuring that the GNS can remain self-sustaining
2. Assist a new Good Neighbour Scheme (GNS) to become operational

**Please note:** If you are considering setting up a new Good Neighbour Scheme please visit <https://www.eastsussex.gov.uk/community/volunteering/good_neighbour_schemes/> for toolkits (guidance and information) on how to develop a GNS, before completing an application.

**The grant can be used, for example, to pay for the following types of activities:**

* Core Costs (phone, paper, stationary, rent, etc.)
* Public Liability Insurance
* Volunteer Expenses
* Publicising and running events such as:
  + Bring-and-buy sales
  + A stall at the village Fete
  + Charity auctions, jumble sales
  + Raffles and coffee mornings
* DBS (Disclosure and Barring Service) Checks (administrative cost)
* Ongoing Publicity

**Completed Grant Applications and supporting documents should be sent to** [**external.funding@eastsussex.gov.uk**](mailto:external.funding@eastsussex.gov.uk) **anytime, however the fund closes for applications at 5pm on Friday 23rd February 2018.**

The total grant funding pot is £8,000 and applications for up to £500 will be assessed as they come in. Applicants will be told if they are successful within three (3) weeks of the receipt of a completed application and supporting documents.

Please be aware that although the fund closes for applications at 5pm on the 23rd February, this is a limited grant funding pot, so applicants are advised to apply early to ensure that sufficient funds are still available.

Please refer to the ***Good Neighbour Scheme Development Grant 2018 Guidance Notes*** to help you complete this form. If you would like further support and advice about completing application please contact one of the following organisations:

* Eastbourne Havens and Seaford South- Age Concern Eastbourne (ACE)
* Eastbourne Havens and Seaford North - Sussex Community Development Association (SCDA)
* High Weald Lewes and Havens South - Action in Rural Sussex (Airs)
* High Weald Lewes and Havens North - Action in Rural Sussex (Airs)
* Hastings and Rother West - Hastings Voluntary Action (HVA)
* Hastings and Rother East - Rother Voluntary Action (RVA)

Contact details for these organisations can be found in the Guidance Notes.

**GNS Application Checklist**

It is important that you work through this GNS application checklist before you start completing the GNS development grant application form.

The GNS application checklist will help you decide whether this grant fund is right for your group.

**Part one - You must be able to answer yes to one of the options to apply**

Is your group: Yes No

* Existing Good Neighbour Scheme □ □
* Community group/ voluntary organisation intending to set up a GNS □ □

If you answered ‘No’ to both of the above questions then you are not eligible to apply to the GNS Development Grant Fund.

**Part two**

* If you are an **established GNS** you must be able to answer yes to all requirements in this section to apply.
* If you are applying as a **new GNS** you must be able to demonstrate that you are in the process of meeting these requirements and commit to providing future evidence of this, before being awarded a grant.

**Does your group: Yes No In Process**

* Have an income of under £50,000 □ □
* Have a set of rules or constitution □ □ □
* Have at least three people named in the set of rules/constitution □ □ □
* Have a bank account, with two unrelated cheque signatories □ □ □
* Have Public Liability Insurance cover up to £10,000,000 □ □ □
* Have an Equalities Policy □ □ □
* Have a Child Protection Policy if relevant □ □ □
* Have a Vulnerable Adult Policy if relevant □ □ □
* Have a Health and Safety Policy □ □ □

**About your activity**: **Yes No**

* Is your application for up to £500? □ □
* Will your activity be completed by 31st March 2018? □ □

**Please note:** If you are an existing GNS you will be expected to submit a completed application and the following documents:

* A set of rules or a constitution with three people named
* A copy of a recent bank statement from the last three months
* Latest accounts or record of expenditure

**Proof of relevant policies and Public Liability Insurance will be required before any grants can be awarded.**

**Section 1 – Your group**

**Q 1** Name

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**Q 2** Address

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**Q 3** Postcode

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**Q 4** Telephone Number

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**Q 5** Email Address

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**Q 6** Website address

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**Q 7** Twitter

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**Q 8** Facebook

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**Q 9** When did your group begin?

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| --- |
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**Q10** Has your group received funding in the last year?

 No  Yes

If yes, please give details below of any funding received in the last financial year.

Funder Amount

|  |  |
| --- | --- |
|  | **£** |
|  | **£** |
|  | **£** |

**Q11** Please explain the structure of your group

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**MAIN CONTACT DETAILS:**

**Q12** Name

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| --- |
|  |

**Q13** Role in group

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| --- |
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**Q14** Daytime telephone number

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**Q15** Mobile phone number

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**Q16** Email address

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**Q17** Address

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**Q18** Postcode

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**Section 2 – Your activity**

**Q19** This grant is to:

 Support an established Good Neighbour Scheme to develop, either through expanding or ensuring that the GNS groups can remain self-sustaining

 Assist a new Good Neighbour Scheme (GNS) to become operational

**Q20** In which locality will your activity take place: (select from the list below)

Eastbourne Havens and Seaford South

Eastbourne Havens and Seaford North

High Weald Lewes and Havens South

High Weald Lewes and Havens North

Hastings and Rother West

Hastings and Rother East

**Q21** Please enter the start and end dates for the activities this grant will fund.

**Start date**

|  |  |
| --- | --- |
| **MONTH** | **YEAR** |

**End date (no later than 31st March)**

|  |  |
| --- | --- |
| **MONTH** | **YEAR** |

**Section 3 – Who will benefit?**

**Q22** How many people do you think will benefit from your activity?

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**Q23** Which groups of people will benefit from your activity?

 Children and young people

 Adults

 Older people

 People with mental health issues

 People with learning disabilities

 People with physical disabilities

 People with a long term condition

 People with a terminal illness

 People on low incomes

 Homeless people

 Black, Minority Ethnic groups

 Lesbian, Gay, Bi-sexual people

 Transgendered people

 Other

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**Q24** From the list above, what group will benefit the most from your activity?

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**Q 25** Which age groups will benefit from your activity and how many?

Numbers

 0 – 4 Early years \_\_\_\_\_\_

 5 – 12 Children \_\_\_\_\_\_

 13 - 18 Young people \_\_\_\_\_\_

 19 - 25 Young adults \_\_\_\_\_\_

 25 - 64 Adults \_\_\_\_\_\_

 65+ Older people \_\_\_\_\_\_

**Section 4 – Activity budget**

**Q 26** Please use the space below to show how much you are applying for and what you will spend the money on.

|  |  |
| --- | --- |
| **Activity** | **Amount** |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  |  |
|  | £ |
| Amount applied for | £ |

**Section 5 –** **Your Activity**

**Q27 Please describe how you will use the grant and what you are hoping to achieve.**

**(Use up to 150 words)**

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**Q28 Please describe how you will you measure the benefit and demonstrate the success of your activity. (Use up to 150 words)**

**Thank you for completing the application.**

Please note: If you are an existing GNS you will be expected to submit a completed application and the following documents:

• A set of rules or a constitution

• A copy of a recent bank statement from the last three months

• Latest accounts or record of expenditure

Depending on the nature of your activity or activity, we will expect you to send us relevant policies should you be awarded a grant.

**DECLARATION:**

1. I am authorised to make an application on behalf of the above group
2. I certify that the information contained in this application is correct
3. If the information in this application changes in any way I will inform East Sussex County Council
4. I give permission for East Sussex County Council to record the details of my group electronically and to contact my organisation by phone, mail or email with information about its activities and funding opportunities

|  |  |
| --- | --- |
| **Signed:** | **Date:** |

## Referee

Please give the name and contact details of someone outside of your group who has agreed to be an independent referee for your application.

We recommend that you use your local area Good Neighbour Scheme support organisation as your reference. Contact details can be found on page 2 of the Guidance Note.

**Note: Your referee must sign this form**

|  |  |  |
| --- | --- | --- |
| Name: Link to group/occupation: | | |
| Address:  Postcode | | |
| Telephone: | Email: | |
| **Signed:** | | **Date:** |