

Central Area Council Youth Work Fund

Application Form



Please read the guidance notes before you start to complete this form. We hope that you will find it quite straight forward but please call the Central Area Team on 01226 775707 or e-mail CarolBrady@barnsley.gov.uk if you have any questions about the form or application process.

Part One – About your organisation

1.1 What is your organisation's name?

1.2 Is your organisation constituted?

Yes ☐ No ☐

1.3 What type of organisation are you?

Voluntary or community organisation ☐

Registered Charity ☐

Social Enterprise ☐

Public service organisation ☐

Small Business ☐

Other ☐

Please provide details

1.4 Organisation details

When did your organisation start?

How many people are on your organisation's management committee or board of directors?

1.5 Who is the main contact for this application?

Name	
Position in the group	
Address	
Postal code	
Telephone number	
E-mail address	

1.6 Who is the secondary contact for this application?

Name	
Position in the group	
Address	
Postal code	
Telephone number	
E-mail address	

1.7 What is your organisation's current financial position?

Select one option and fill in the amounts from your accounts or projection.

Information from the latest accounts approved by your organisation ☐
12 month projection because you've been running less than 15 months ☐

Account year ending Day Month Year

Total income for the year

Total expenditure for the year

Surplus or deficit at the year end

Total savings or reserves at the year end

Does your organisation have its own bank account?

Yes ☐ No ☐

1.8 Policies

It is important that your organisation has up to date Policies in place.

Please confirm which of these policies you have:

Health and Safety	<input type="checkbox"/>	Safeguarding	<input type="checkbox"/>
Insurance	<input type="checkbox"/>	Equalities and Diversity	<input type="checkbox"/>
Volunteer Policy	<input type="checkbox"/>	GDPR	<input type="checkbox"/>
Recruitment, Discipline and Grievance Policies	<input type="checkbox"/>	Environmental Policy	<input type="checkbox"/>

1.9 Insurance

Your organisation should have appropriate insurance in place. (TO BE CLARIFIED)

Please tick this box to confirm that your organisation has appropriate insurance cover in place

☐

Section 2 - About your proposed project

2.1 Project Name

2.2 Dates for delivery

Please tell us when your project delivery will commence, and when it will be completed.

2.3 Tell us about your project – Please provide a brief overview about your project.

You should cover points 1-3 from section 5 of the guidance notes in your response.

- What will be delivered where and when

2.4 Tell us how your proposal will engage young people aged 13+ and how issues of transition into adolescence will be addressed.

You should cover points 4-7 from section 5 of the guidance in your response.

Your response should include:

- Describe the innovative ways of initially engaging young people that will be deployed during the project
- Demonstrate how the engagement of young people will be sustained through their adolescent transition
- Use innovative ways of delivering social and life skills in a community and/or outreach / detached setting
- Provide information about how you will encourage those children and young people who need it most to access your project/sessions
- Provide evidence that your project/approach will work
- Identify any barriers to involvement and discuss how these will be addressed by your project/service

2.5 Tell us about the area/s to be covered by your project.

You should cover points 8-11 from section 5 of the guidance in your response.

Your response should include:

- Identification of the specific/wards/areas/neighbourhoods that your project will target.
- Why these areas have been identified.
- The differing needs & challenges of the area.
- Examples of community-based and/or outreach/detached settings where your project will be delivered.
- How you will engage with local councillors and other stakeholders

2.6 Tell us how your approach will be young person centred and how it will raise aspirations and widen horizons of those young people participating.

You should cover points 12-16 from section 5 of the guidance in your response.

2.7 How will your project complement existing provision in the area?

You should cover point 17 from section 5 of the guidance in your response

Your response should include:

- Knowledge about existing provision in the area.
- Knowledge about any other Central Area Council procured services in the area.
- How your project will link in and/or complement this work.

2.8 Tell us how your project will deliver volunteering opportunities and social action

You should cover points 18-20 from section 5 of the guidance in your response

Section 3 – How will you manage your project

3.1 Project Management

How do you plan to manage your project? You should cover point 21 from section 5 of the guidance in your response

Your response should include:

- Any experience you have of delivering projects
- Experience of staff and volunteers in your organisation
- How you will make sure that people working on the project have the right skills and knowledge
- How you will manage any gaps in experience, skills and expertise
- How you will manage your project budget
- Systems in place for effectively managing a project

3.1 Milestones

Please provide a number of key milestones for your project.

Milestone	To be achieved by
For example: First session delivered	June 2020

3.2 Working towards Achievement of Outcomes – Quarterly Monitoring and Targets

What difference will your project make to addressing Central Area Council priorities and the 5 ways to wellbeing Framework?

The interventions/activities delivered as part of your project should directly contribute.

With this in mind, please complete the table below providing a number of outcome indicators with quarterly targets that are relevant to your project.

(The ones already listed are examples only)

	20-21 Quarter 1 April - June	20-21 Quarter 2 July - Sept	20-21 Quarter 3 Oct - Dec	20-21 Quarter 4 Jan – March	21-22 Quarter 1 April – June	Total Project target
Outcome Indicators	Target	Target	Target	Target	Target	
For example: Number of young people attending 3+ sessions	15	20	20	25	30	
For example: Number of new young people volunteering on a monthly basis						
For example: Number of children reporting an improvement in their emotional wellbeing.						

3.3 Evidence of Impact

As part of your monitoring, your milestones and achievement of targets will need to be evidenced. Please tell us how you will evidence these and what you will provide on a quarterly basis.

Section 4 – The funding you need

4.1 Budget table

Complete the table to show us how much your project will cost and what you plan to spend your funding on.

Total project costs – include VAT where applicable			
	Total	Amount requested from Central Youth Resilience Fund	Funding from other sources
Project Costs			
Staffing			
Sessional costs			
Resources/equipment			
General running expenses			
Training			
Transport/Travel			
Other			
Total project costs			

4.2 Project Funding

If some of the money for your project will come from other sources, please give us the details below.

4.3 Payment Schedule

Payment schedules will form part of the contract discussions with successful applicants.

Your grant payments will be made on a quarterly basis following satisfactory submission of your quarterly monitoring form. Please detail how you would like to receive your grant. The total amount should equal the grant amount requested in question 4.1.

	Payment Amount
20/21 Quarter 1 – April - June 2020	£
20/21 Quarter 2 – July – September 2020	£
20/21 Quarter 3 – October – December 2020	£
20/21 Quarter 4 – January – March 2021	£
21/22 Quarter 1 –April –June 2021	
Total Amount	£

Section 5 – Declaration and signatures

Data Protection

If you have applied for, or hold, a grant with us, we will use the information you give us during the assessment of your application and the life of your grant to administer and analyse grants and for our own research purposes.

We may give copies of all or some of this information to individuals and organisations we consult when assessing applications, administering the programme, monitoring grants and evaluating funding processes and impacts.

Declaration

We confirm that we are duly authorised to sign this declaration on behalf of the applicant organisation.

We confirm that this application and the proposed project within it has been authorised by the management committee, other governing body or board or, if a statutory organisation by a senior member of staff.

We certify that the information given in this application is true and confirm that the enclosures are current, accurate and adopted or approved by our organisation.

We understand that, if we make any seriously misleading statements (whether deliberate or accidental) at any stage during the application process, or if we knowingly withhold any information, this could make our application invalid and we will be liable to repay any funds.

We confirm our organisation has the legal powers to set up and deliver the project described in this application form

Signatory one

This must be the main contact named in question 1.4 of this form

Title	<input type="text"/>	Forename	<input type="text"/>	Surname	<input type="text"/>
Position	<input type="text"/>			Date	<input type="text"/>
Signature	<input type="text"/>				

On behalf of
(Organisation name)

Home address

Signatory two

This should be the chair, chief executive or a person of similar authority in your organisation. This person must be different to signatory one.

I confirm that this application and the proposed project within it has been authorised by the management committee or other governing body.

Title Forename Surname

Position Date

Signature

On behalf of
(Organisation name)

Home address

Section 6 – Check your application is complete

The main contact has signed the declaration in section 5	
The chair, chief executive, or person of a similar authority in your organisation has signed the declaration in section 5	
We have enclosed our most recent annual accounts or three months bank statement	
We have enclosed a copy of our safeguarding policy	
We have enclosed a copy of our constitution	
We have enclosed a copy of our insurance policy	

How to send us your form

Send your completed form to the postal or email address below. Your application form should reach us no later than **Friday 27th March 2020**.

Email: CarolBrady@barnsley.gov.uk

Carol Brady
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