





North West Ipswich Big Local Trust Application for Support

The North West Ipswich Big Local Trust welcomes partnership working. We want to work with organisations across the area to enable the community of Whitton, Whitehouse and Castle Hill to thrive and be a beacon of community resilliance and opportunity.

Funding support and a partnership approach is one way of achieving this aspiration.

1. About Your Organisation			
Contact Name:	Organisation Name:		
Position:			
Address:	Email Address:		
	Website:		
Postcode:	Telephone Number:		
What is the legal status of your organisation	n? Please tick below		
☐Unincorporated Association (a group with a	set of rules)		
☐ Charity Company Limited by Guarantee (please provide us with your company registration number):			
☐Local branch of a National Organisation			
☐Social Enterprise			
☐Registered Charity/CIO/Trust (please provide	us with your registration number):		
2. Please tell us about your organisation:			
Charity Number (if applicable):			
Company Number (if applicable):			
When did your organisation start? Month: Year:			
How many people are on your organisations Governing Body or Board of Directors?			
Are you a branch of a larger organisation? Yes:	□ No: □		

3.Bank Account details:		. ,	
Account name (this should be the sa		ion):	
Sort code:	Account No:		
Name of bank/ building society: Bank address:			
What public liability cover does your	organisation have:		
What public liability cover does your	organisation have.		
Please provide a summary from y	our most recent accounts:		
Are the figures given			
Information from your most relationships	ecent accounts approved by your c	organisation?	
Or		_	
A projection because your organisation has been running for less than 15 months?			
Account year ending:		1 1	
Total income for the year (A)		£	
Total expenditure for the year (B)		£	
Surplus or deficit for the year (A-B)		£	
Total savings or reserves at the year	r end	£	
La this the first time warm arranics	tion has applied for freeding from	DI TO Van / Na	
Is this the first time your organisa	tion has applied for funding from	n NWIBLI? Yes/No	
Please give details:			

2. About the Project/Activity
2.1Project details
Project Title:
Project site address:
Please give comprehensive details of your project. (aims / values and activities) (Maximum 300 words):
Have you read and understood the North West Ipswich Big Local plans and aims? Yes / No
Please explain how your project help NWIBLT achieve their aims?
2.2 Benefits:
What are the benefits of this project:
Who benefits from this project:

How many people will benefit from this project:			
Directly (on the project):	Indirectly (family, friends and wider community):		
Are they mainly in the NWI BLT designated a	area? Yes / No		
Who in your organisation will be involved in this project: Please give details:			
Name:			
Role:			
Email:			
Contact number:			
When will your project take place?			
Start Date / / Is your start date Fixed Flexible	End Date / /		
2.3 Monitoring and Evaluation:			
Please note your organisation will be required to complete NWI BLT monitoring and Evaluation forms. We will require the following information from you at the end of your project. Please read through and be sure that you will be able to provide us with this detail. Total numbers engaged with across Whitton, Whitehouse and Castle Hill. Total numbers engaged with in our 'pink area' – map and road names available on website. Impact made. Photos, case studies and testimonials. Breakdown of how the money was spent. How will you measure the success of your project and its impact on the North West Ipswich Community?			

We are keen to support projects that can demonstrate a level of sustainability after this funding has been spent. You might also like to indicate if your project will leave behind any form of legacy . Please describe the measures you will take to ensure that your project will be able to continue and any legacy left behind.				
3. Project Costs:				
How much will each item or activ Local Trust?	ity cost and how much are yo	ou applying for from NW Ipswich Big		
Activity	A. Total Cost	B. Amount requested from BLT**		
Total	£	£		
** PLEASE INDICATE THE TOTAL LOCAL TRUST:	AMOUNT OF FUNDING REQU	JESTED FROM NW IPSWICH BIG		
A) BETWEEN £0 - £5,000				
B) BETWEEN £5,001 - £10,000	0			
Please note:		05.004.040.000		
There is a <u>5%</u> match funding requirement for projects seeking between £5,001 - £10,000 – see guidance for further information				
How much funding has been secured towards the overall cost of the project and where has it come from?				
NONE SECURED				
£FROM:				
£TOTAL SECURED				

Have you applied for any funding from other sources on which a decision is pending and if so, how much and where from?
NO YES
£FROM:
£TOTAL ON DECISION PENDING

DECLARATION			
You must tick all the boxes below to confirm that:			
You have answered all the relevant questions in this application form.			
You are authorised to apply for funding support from the NW Ipswich Big Local Trust on behalf of your organisation.			
You certify that the information contained in this application is true and correct.			
You will notify NW Ipswich Big Local Trust immediately if the information changes in any way.			
You give permission for NW Ipswich Big Local Trust to record the information in this application electronically and to contact the organisation by telephone, post or e-mail to discuss it's activities or funding opportunities			
You confirm that your organisation will only use the grant for the reason given in this application. If it is used for anything else, NW Ipswich Big Local Trust may ask the group or organisation to repay it, and may want to see your organisation's accounting records.			
You acknowledge that the group or organisation will also have to repay any money you don't spend.			
You understand that the NW Ipswich BLT Partnership's decision is final.			
You understand that your organisation is required to report back on the way the grant has been used and its impact.			
Unless you notify the NWIBLT Project Officer to the contrary, you give consent for the NWI BLT to use photographic images or film footage for publicity and promotional purposes.			
Signature:			
Full Name:			
Position:			
Date:			
SENDING US YOUR APPLICATION			
We prefer to receive applications by e-mail, but we will also accept them by post. When you application is complete, please e-mail it to:			
faye.smith@communityactionsuffolk.org.uk			
Please put the name of your organisation in the subject field of your e-mail. You will receive an acknowledgement to confirm that we have received your application.			
Or send your application to:			
Faye Smith Big Local Trust Officer Brightspace c/o Community Action Suffolk 160 Hadleight Road P2 0HH			

For office use only

Amount Requested			
Application Reference Number			
Checklist Complete			
Notes			
Reviewing Officer			
Support Accepted	Support Declined	Further Information	