

SECTION 1: ABOUT THE APPLICANT

1.2 Name of the Organisation

This is required again because the front sheet of the application form with your contact details will be removed for data protection and administrative purposes.

CHURCH KIRK RESIDENTS ASSOCIATION

SECTION 2: ABOUT THE ORGANISATION

2.1 You need to submit one of the following documents to support your application

Please see guidance notes section 1.1 before completing this part of the form

- Constitution
- Set of Rules
- Terms of Reference
- Articles of Association

COPY SUPPLIED WITH RECENT APPLICATION

2.2 How many people are in your organisation?

Paid Staff	Volunteers	Total Members <i>Please include here the total number of people who use your organisation and not just elected members.</i>
	3	PLUS 25/30 RESIDENTS

2.3 Has your organisation received funding from the Local Member Grants Scheme before?

- YES
- NO

Please provide the date received ___/___/___ IN THE PROCESS NOT RECEIVED PAYMENT AS YET

4.3 What are you going to spend the grant on?

You need to tell us what you are going to buy with the money from the grant, for example, the piece of equipment you are going to buy, or what items you are going to buy if the money is to help with an event you are arranging. Detailed costs are required on the next page.

PORTABLE CCTV CAMERA/KIT x 2

4.4 How will the money benefit people in the Councillor(s) division(s)?

See guidance notes section – 2.3. You need to tell us how this money will help your organisation specifically and also the general public who live in the county councillor(s) electoral division, for example will it help bring people together or help stop anti-social behaviour.

HELP REDUCE CRIME & DISORDER AND PUBLIC NUISANCE.
TO PROVIDE EVIDENCE TO REDUCE THE ABOVE.

4.5 What is the total cost of the activity?

For example this is the amount it will cost to buy the equipment/hold the whole event.

£ 800.00 .

4.6 How much are you applying for from the Local Member Grants Scheme?

£ 800.00 .

4.7 If you are not asking for the full cost of funding for your activity please tell us where the rest of the money is coming from and if it has been secured at the time of your application.

The figures here, together with the figures in 4.6 should add up to the total cost in 4.5.

How much?	Funding period	Funder/Applied or Confirmed?
£		
£		
£		
£		

5.2 If you have ticked 'Yes' above, does your organisation have children or vulnerable adult protection policies in place?

See guidance notes section – 4.1.

Yes – Please supply relevant copies with your application.

No – Please answer question 5.4.

5.3 If you answered 'yes' to question 5.1 are the appropriate individuals cleared by the appropriate DBS Check (Standard/Enhanced/Enhanced with Barred List)

NB we operate a 'spot-check' procedure, which may require you to provide evidence at a later date.

Yes

No – Please answer question 5.4.

5.4 If you have ticked 'No' to either questions 5.1, 5.2 or 5.3, please explain why and why you feel clearance is not necessary to enable us to consider whether your application can proceed.

If you are purchasing equipment, you need to state here that no children or vulnerable adults will be involved in the purchase of the equipment.

EQUIPMENT WILL BE PURCHASED BY CKRA FOR USE BY
RESIDENTS TO ~~BE~~ OBTAIN VIDEO EVIDENCE,
~~COMPLYING~~ COMPLYING WITH DATA PROTECTION REGULATIONS

State Aid rules.

- The use of the grant is in breach of County Council Policies and Procedures.

We understand that by signing this form, if the application is approved by the County Councillor(s) named, we are contracting to spend the funding as stated in this application form and to provide the monitoring and other information required under the terms of the Local Members Grant Scheme.

Declaration

- ✓ We certify that to the best of our knowledge the information provided in the application form is accurate and correct.
- ✓ That the persons below can both sign on the organisation's bank account (please note that the two signatories cannot be related to each other)
- ✓ By signing and submitting this form, we agree to the funding agreement detailed here.
- ✓ We declare that the organisation meets the general eligibility criteria as set out in the guidance notes.

We also understand that should this application be successful, the information contained in the application form will be used to form the basis of the funding agreement and for monitoring purposes.

Name of Organisation: CHURCH KIRK RESIDENTS ASSOCIATION

JEAN BATTLE

Name of First Signatory (please print)

Acting chair

Position in the Organisation (please print)

Signature

J Battle

Date: 5.3.2018

Laura Hollister

Name of Second Signatory (please print)

SECRETARY

Position in the Organisation (please print)

L Hollister

Signature

Date: 14/3/18