

# Henry Smith Charity County Grants Application Form

## Your organisation

### Organisation Contact Details

*Please note: On the longer questions on this form there is a spell check function which can be accessed by clicking where you see a small tick by the left of the answer box; and where you see an 'i' icon you can click on it for further information.*

#### Organisation Name

**Prefix**

**First Name**

Of main contact for your organisation

**Last Name**

Of main contact for your organisation

**Job Title**

(e.g. CEO)

#### Address of Organisation

**City**

**County**

**Post Code**

**Organisation E-mail Address**

**Website Address**

If applicable

### About Your Organisation

**Describe the services or help that your organisation provides, and why it is needed in this area (i.e. tell us what the area is like, and describe the needs of the people you work with)**

**Organisation Type**

**Charity Number**

Where applicable

**Date Charity Registered**

Where applicable

**Company Number**

Where applicable

**Company Registration Date**

Where applicable

**If your organisation is not a registered charity, provide details of a UK registered charity through which any grant can be paid.**

Please enter the full charity name, address and charity number as it appears on the charity commission register.

**Total number for your whole organisation of:**

**Org Staff**

Full-time equivalent

**Org Vols**

**Org Beneficiaries**

People Helped Each Year

**Additional Documents**

*Please ensure that you click the 'UPLOAD' button after you have identified which files you want to upload in order to attach them.*

**Financial Report Date**

**Please upload your Accounts.**

Your organisation's most recent audited or independently inspected accounts.

**Please upload the projected expenditure budget for your organisation for the next 12 months.**

This must include information on where the balance of funds will/has been raised.

**Contact Details**

**Main Contact Details for this Request**

*Please enter the details of the best person to contact to discuss this application. These details may be the same as the main contact for the organisation, if they are, you will need you to re-enter them.*

**Prefix**

**First Name**

Of main contact for this request.

**Last Name**

Of main contact for this request

**Job Title**

Please enter the Job Title of the Main Contact.

**Address**

Please enter the main address of your organisation. We will use this address for all correspondence.

**City**

**County**

**Post Code**

**Phone**

**E-mail Address**

Please provide an email address for us to contact you about this application.

**Request Details**

**Your Funding Request**

**Please select the County where your work takes place.**

Within this programme we are able to consider funding work which takes place within one of the following 8 English counties

**Please select the type of grant you are applying for.**

**Describe the work/service you are asking us to fund:**

**How many individuals will benefit from this funding?**

**In what ways will the people you are working with benefit?**



**Is there anything else you would like to tell us about your organisation or request for funding?**

SAMPLE

**When do you need the funding to start?**

**Date Funding Required**

Please provide the date you would like the project to start.

**Safeguarding and Welfare**

**Please select this box to confirm that your organisation has a safeguarding policy.**

Your policy must be up to date and your staff must have suitable training and support to deal with any safeguarding issues.

No

**Please select this box to confirm that Disclosure checks are carried out on all staff and volunteers working with children or vulnerable people.**

No

**Please give specific details of your safeguarding processes and procedures.**

If you believe these are not needed, please explain why.

### **Additional Information**

*Please ensure that you click the 'UPLOAD' button after you have identified which files you want to upload in order to attach them.*

**Please upload an attachment with the names and addresses of two independent referees.**

Please ensure you provide details of the organisation for which they work as well as their contact details.

**If you are applying for a specific salary, please upload the relevant job description.**

If you are applying for more than one salary, please attach all relevant job descriptions in one document

### **Budget and Beneficiaries**

#### **Budget Information**

*Please note, you will not be able to enter any text such as commas or £ characters in answer to the next 4 questions.*

**What is the total amount required to fully fund this work/service?**

**How much have you already secured towards the total budget?**

Please provide the total secured only, not pending applications.

**How much are you requesting from us in total?**

Amount requested from the Henry Smith Charity only.

**Amount year 1**

Max £10,000

**Amount year 2**

Max £10,000

**Amount year 3**

Max £10,000

**Please upload a full budget breakdown for your project or organisation (whichever is applicable).**

We are able to fund on a full costs recovery basis

**Please upload a summary of other funding applications you have made (or plan to make) towards this work.**

**Previous Funding (if Applicable)**

**Previous Funding If Applicable**

*If you have received a grant from the Henry Smith Charity during the previous 18 months, you must also answer the following questions. If this applies to your organisation and the questions are not answered, your application will not be considered and will be returned to you unread..*

**What work or service did you deliver with the grant and how many people benefitted?**

**Did you spend the grant as set out in the original budget? If not, why was this?**

**What practical results (outcomes) were achieved during the grant?**

**Were there any problems during the grant? If so what did you learn and how have you addressed these in this new application?**

## **Confirmation and Authorisation**

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#### *Data protection*

*In submitting this form you are confirming you have the written agreement and permission of any individuals identified\* in your application to pass their personal information to the Henry Smith Charity, who will hold and process their personal data in accordance with all current data protection legislation.*

*We will use this information only for the purposes of assessing your application, managing or monitoring any grant awarded, related administration or research purposes, and for sharing relevant information to other funding organisations to use in their own assessment of applications and managing or monitoring of grants awarded. Data may be retained for up to 8 years, after which time it will be destroyed in accordance with our data retention policies.*

*We wish to take good care of personal data, and only process personal data necessary for our purposes. For this reason we strongly advise that you do not provide details of named or identifiable individuals (e.g. their job title, connection to your organisation, physical attributes or other description etc) either in details of beneficiaries aided, in case studies provided, or in any other information. Should you have particular reasons why such information should be provided to us, please contact us before sending us the information.*

*Information that is provided in excess of our application guidelines will not be read, and will be destroyed on receipt, in order to assist us in managing data securely and appropriately.*

*The Henry Smith Charity is a Data Controller registered with the Information Commissioner's Office – Registration number Z8024318.*

**Please confirm that you are happy for us to retain your information to be processed in accordance with the Data Protection Act 1998**



No

**I confirm that all information provided in this application is true and correct and I am authorised to submit an application on behalf of the organisation.**

We reserve the right to share information received from applicants requesting funding, and from those in receipt of funding from us, with other grant makers, unless an organisation expressly requests otherwise. Knowingly providing false information will invalidate any application or grant.

No

SAMPLE