

#### **The Children’s Aid Committee Charitable Fund**



**GRANT AID APPLICATION FORM**

**Charity Registration Number 1177803**

**www.thecac.org.uk**

**PLEASE COMPLETE EVERY SECTION AND INCLUDE REQUIRED DOCUMENTS WITH YOUR APPLICATION**

# DETAILS OF ORGANISATION

|  |  |
| --- | --- |
| **Registered Name of Charity** |  |
| **Known as** |  |
| **Charity Registration No** |  |
| **Charity Website** |  |
| **Address & postcode** |  |

## CONTACT DETAILS

|  |  |
| --- | --- |
| **Name and position** |  |
| **Are you a professional fundraiser?****Have you ever applied to CAC on behalf of others?****If yes who.** | Yes/NoYes/No |
| **Address and postcode****Please be sure to complete contact details** |  |
| **Phone day****Phone evening****Fax****Mobile****E-mail** |  |

1. **PERSONNEL**

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| --- | --- |
| **Current Nominated Honorary Officers by Name** | and position: |
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| --- | --- |
| **Name of Leader in Charge**  |  |
| **Qualifications of leader** |  |
| **Paid staff employed by the organisation** |  |
| **Number full time** |  |
| **Number part time** |  |
| **What qualifications do they hold** |  |
| **Number of volunteers involved.** |  |

1. **MEMBERSHIP INFORMATION**

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| --- | --- | --- |
| **Age groups /bands** | **Numbers attending in each band** | **Major day of the week** |
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1. **PREMISES**

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| **Please give details of the premises, their size and facilities.** |  |
| **Are the premises :- freehold/leasehold/rented** |  |

1. **POLICIES**

|  |  |
| --- | --- |
| **Do you have a Health & Safety Policy?** | Yes/No |
| **When was it last updated? Date** |  |
| **Can a copy be made available for inspection?** | Yes/No |

|  |  |
| --- | --- |
| **Do you have a Safeguarding Policy?** | Yes/No |
| **When was it last updated? Date** |  |
| **Can a copy be made available for inspection?** | Yes/No |
| **What procedure do you have to vet staff & volunteers** |  |

1. **SAFEGUARDING QUESTIONS**

* **When was your Safeguarding Policy last approved by the Board?.................**
* **Please attach a copy of your organisation's most recent Safeguarding policy document and any supporting documents you may have (eg. from your Local Authority)**
* **Who is the Designated Safeguarding Lead (DSL) in your organisation and when did they last undergo Level 3 training or equivalent? (Please attach a copy of their certificate)**

**………………………………………………………………………………………..**

* **What safeguarding training takes place for all staff, volunteers and trustees and how often?**
* **What Safeguarding concerns and/or serious incidents have been brought to the attention of any regulatory bodies, including the Charity Commission in the past year?**

* **How have these concerns / incidents been dealt with and what are the learning points and actions for the charity?**

1. **FINANCIAL DETAILS**
* **Please can you submit with your application, the following TWO PAGES from your most recently submitted set of annual accounts:**
	1. Profit and Loss Account / Statement of Financial Activities
	2. Balance Sheet / Statement of Financial Position

Regarding your most recent sent of accounts filed with the Charity Commission:

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| --- | --- |
| **What date were they submitted ?** |  |
| **What accounting period do they cover?**  |  |

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| --- |
| **Please provide full details of ANY Trust Funds associated or connected with your organisation.** |
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1. **PROJECT OUTLINE & METHODOLOGY**

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| --- | --- |
| 1. **AIM OF PROJECT (what does it seek to improve)**
 | Age rangeNumbersSpecific issues targeted |
| 1. **DESCRIPTION OF ACTIVITIES & METHODOLOGY**

**(how will your activities be structured & delivered)** | KEY PERSONNELProject leaderOther staffQualifications |
| 1. **STAGES AND TIMESCALES OF PROJECT DELIVERY (the process of setting up and delivering the project)**
 | WHEN BY / LOCATION |

|  |
| --- |
| **Evaluation: How will the effectiveness of the project be measured?** |
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1. **PROJECT BUDGET**

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| --- | --- |
| **Total estimated cost.** | £ |
| **Amount requested from the CAC** | £ |
| **Are you registered for VAT** | Yes/No |
| In the case of applications for equipment or building costs, please also provide 2 current estimates |
| **PROJECT BUDGET** |

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| --- |
| **What other sources of funding have been tried for this purpose and with what results?** |
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| **Any other comments or information you may wish to give should be included here. Please be brief as if the Fund considers a grant, your organisation may be visited and this will provide an opportunity to discuss the application** |
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1. **CONDITIONS TO BE MET SHOULD A GRANT BE MADE**

A condition precedent to a grant being made is the giving of undertakings by a duly authorised official of the applicant in the terms set out below and we would be obliged if you will confirm as follows:

a) We undertake not to allow any activities in our Club/Centre, which may constitute an offence to the Office of the Chief Rabbi

b) We undertake that any grant will only be used for the purposes for which it is requested and granted.

c) The CAC reserve the right to demand repayment of the grant in full in the event of any building associated with the applicant’s or/and this grant being sold within 5 years. We will take legal action for recovery of any grants against your organisation or/and its trustees and recommend that your trustees hold professional indemnity insurance.

d) We confirm that all the information provided is accurate.

Please also agree to the following:

e) That we may use information from your application and retain on our files without further reference

f) We may take up references or make enquiries as we see fit in relation to this application

|  |  |
| --- | --- |
| **Signed by a duly authorised official** |  |
| **Please print name** |  |
| **Position of duly authorised official** |  |
| **Date** |  |

**PRE-SUBMISSION CHECKLIST**

**PLEASE ENSURE YOU ARE ENCLOSING:**

1. **Copy of Safeguarding policy**
2. **Copy of Safeguarding lead person's qualification**
3. **Financial details as required**