

**COMMUNITY FACILITIES PROGRAMME**

##### EXPRESSION OF INTEREST

(July 2017)

Please read the Community Facilities Programme Guidance before completing this form. Including photographs with your application will help to illustrate the need for your project.

Please return your completed expression of interest accompanied by a copy of your organisation’s latest annual accounts\* by e-mail to:

[CommunityFacilitiesproghelp@gov.wales](mailto:CommunityFacilitiesproghelp@gov.wales)

Or in hard copy to:

Community Facilities Programme

Communities Division

Welsh Government

Rhyd-y-car

Merthyr Tydfil

CF48 1UZ

\*Where annual accounts are not available please include a copy of your business plan and or up to date financial projections.

**ABOUT YOUR ORGANISATION**

In order to apply for the Community Facilities Programme, the lead organisation must be a community and voluntary (third) sector organisation. This includes social enterprises. Local authorities may apply in exceptional circumstances i.e. when the project is in a former Communities First cluster and there is no suitable community group to lead the application.

**NAME OF ORGANISATION:**

**TYPE OF ORGANISATION e.g. Charity, Company Limited by Guarantee, Community Interest Company, etc.:**

**COMPANY OR CHARITY REGISTRATION NUMBER IF APPROPRIATE:**

**PLEASE INDICATE WHICH LANGUAGE YOU WOULD PREFER TO BE CONTACTED IN:**

WELSH or ENGLISH or EITHER

**NAME OF PROJECT:**

**ADDRESS OF PROJECT (INCLUDING POSTCODE):**

**IS THE PROJECT LOCATED IN A FORMER COMMUNITIES FIRST CLUSTER?**

YES or NO

**ADDRESS FOR CORRESPONDENCE (IF DIFFERENT):**

**CONTACT NAME(S) WITHIN YOUR ORGANISATION:**

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**TELEPHONE NUMBER(S):**

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**E-MAIL ADDRESS:**

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**ABOUT YOUR PROJECT**

Tell us about your project. How would you use a community facilities programme grant? What changes do you intend to make to your community facility? Please use no more than **500** **words**.

**HOW IS YOUR COMMUNITY INVOLVED IN THE OPERATION OF YOUR FACILITY**

How have you engaged the users of your facility in the development of your project? How will they stay involved in the future? How do you manage volunteers? How many volunteers does your facility have and what do they do? Please use no more than **500** **words**.

**PLEASE TELL US ABOUT THE COSTS OF YOUR PROJECT? HAVE YOU SECURED MATCH FUNDING?**

Applications which have secured match funding for their projects will score more highly against the funding criteria. Please check the programme guidance for more information on match funding.

**WHAT IS THE ESTIMATED TOTAL COST OF YOUR PROJECT?**

**HOW HAS THIS COST BEEN CALCULATED?**

**HOW MUCH COMMUNITY FACILITIES PROGRAMME FUNDING ARE YOU SEEKING?**

**HAVE YOU SECURED MATCH FUNDING?** YES or NO

**IF YES, WHERE FROM?**

**IF NO, WHERE DO YOU INTEND TO APPLY FOR MATCH FUNDING AND WHAT IS THE TIMESCALE?**

**ABOUT YOUR PARTNERS**

The Welsh Government is seeking to fund improvements to community facilities which are used by and useful to the communities they serve. We want applications from organisations working in partnership with others. Partners can be from the private, public or third sectors. We believe that telling us about the organisations you are working with will allow your application to demonstrate that the project is both of strategic value and sustainable for the next three to five years. Please tell us about your partners, . Please check the Community Facilities Programme Guidance for more information on what we mean by partners.

**WHO ARE YOUR PARTNERS? At least one partner should be a strategic or key partner e.g. local authority, housing association, Welsh Government anti-poverty programme or similar. We will use this information to contact your partners about the project.**

**PLEASE PROVIDE NAMES, TELEPHONE NUMBERS AND E-MAIL ADDRESSES FOR YOUR CONTACTS WITHIN PARTNER ORGANISATION:**

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| **ORGANISATION** |  |
| **NAME** |  |
| **TEL NUMBER** |  |
| **E-MAIL** |  |
| **ORGANISATION** |  |
| **NAME** |  |
| **TEL NUMBER** |  |
| **E-MAIL** |  |
| **ORGANISATION** |  |
| **NAME** |  |
| **TEL NUMBER** |  |
| **E-MAIL** |  |

**OTHER THAN THOSE PARTNERS MENTIONED ABOVE, ARE YOU WORKING WITH OTHER GROUPS OR ORGANISATIONS? IF SO, PLEASE TELL US ABOUT THESE.**

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**PLEASE TELL US HOW YOU WORK IN COLLABORATION WITH YOUR PARTNERS**

Do they help you to deliver your project? Do they contribute to the running costs of your facility? Do they provide help and support in running the facility? How have they been involved in the development of your project? Please use no more than **500 words**.

**HOW IS YOUR PROJECT HELPING TO TACKLE INEQUALITY AND IMPROVE OPPORTUNITY IN YOUR COMMUNITY? HOW WILL YOUR COMMUNITY BENEFIT FROM YOUR PROJECT?**

The main focus of the Community Facilities Programme is to increase opportunity, creating prosperity for all and developing resilient communities where people are involved, engaged and empowered. How will local people get involved? Will you provide opportunities for people to learn, volunteer, socialise, exercise, seek help or advice? Please use no more than **500 words**.

**HOW WILL YOU MAKE SURE YOUR ORGANISATION CAN DELIVER YOUR PROJECT?**

What experience does your organisation have in delivering similar projects? What relevant skills and experience does your management committee or board have? If you do not have relevant experience will you be supported by a partner organisation and if so how? Please use no more than **500 words**.