

**COMMUNITY FACILITIES PROGRAMME**

##### APPLICATION FOR A SMALL GRANT OF UNDER £25,000

**2022-2026**

**Please read the Community Facilities Programme Guidance Notes and Frequently Asked Questions before, and during the completion of this form.**

Including photographs with your application will help to illustrate the need for your project.

Please return your completed application form signed by two (unrelated) signatories by email to: CommunityFacilitiesProgHELP@gov.wales

Applications must be accompanied by a copy of your organisation’s latest annual accounts\*.

Please submit all supporting documents electronically. These can be sent by e-mail to: CommunityFacilitiesproghelp@gov.wales

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

If you have any difficulties sending documents electronically please contact the team by email at CommunityFacilitiesProgHELP@gov.wales

**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.

**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):**

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

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

**Please provide a minimum of two contact names identifying who is the project lead.**

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| **Project Lead:** |
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**TELEPHONE NUMBER(S):**

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| **Project Lead:** |
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**E-MAIL ADDRESS:**

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| **Project Lead:** |
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1. **ABOUT YOUR PROJECT**

Tell us about your project.

Please use no more than **500** **words**.

* How would you use a community facilities programme grant?
* What changes do you intend to make to your community facility?
* How will you avoid duplication with other community facilities in your area?
1. **HOW IS YOUR COMMUNITY INVOLVED IN THE OPERATION OF YOUR FACILITY?**

Please use no more than **500** **words**.

* 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?
1. **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. We expect all applicants to do their best to secure as much match funding as possible. 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, HOW MUCH AND WHERE FROM?**

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

**PLEASE TELL US ABOUT THE TIMESCALE FOR YOUR PROJECT. WHEN DO YOU EXPECT THE WORK TO BE CARRIED OUT?**

**DO YOU OWN OR ARE YOU SEEKING THE GRANT TO PURCHASE THE PROPERTY TO BE IMPROVED?**

 **YES 🞎 NO 🞎**

**IF NO, DO YOU HAVE A LEASE OF 5 YEARS MINIMUM?**

 **YES 🞎 NO 🞎**

1. **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 should include at least one community group using your facility.

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.

**WHO ARE YOUR PARTNERS? More information on partners can be found in the Community Facilities Programme Guidance, 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**

Please use no more than **500 words.**

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

Please use no more than **500 words**

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?
* How will the community benefit over the long term?

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1. **HOW IS YOUR PROJECT HELPING TO TACKLE THE CLIMATE AND NATURE EMERGENCIES?**

Please use no more than **500 words**

Please tell us if:-

* Your project will reduce the carbon footprint of your facility
* Improve local biodiversity or
* Contribute towards combatting the Climate and Nature Emergencies.
1. **WHAT ARE THE EXPECTED PROJECT TARGETS OF THE CHANGES YOU INTEND TO MAKE AND HOW WILL THESE BE MEASURED?**

Please use no more than **500 words**.

* Will your project allow new activities to take place?
* Will new user groups use your facility?
* Will you be seeking new volunteers to help run the project?

You need to identify a minimum of three measurable targets for your project.

**Please see the guidance for further information on this.**

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

Please use no more than **500 words**.

* What experience does your organisation have in delivering similar projects?
* What relevant skills and experience does your management committee or board have?
* Tell us how you operated during the Covid-19 pandemic.
* If you do not have relevant experience will you be supported by a partner organisation and if so how?

**ADDITIONAL INFORMATION**

Is there anything else you would like to tell us about your project? Please use no more than **500 words**.

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| **SIGNATURES** |
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| **I confirm the information contained in this application is true and complete.** |
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| Person submitting the application: |
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| Signature: |  |
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| Name in BLOCK LETTERS: |  |
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| Position in organisation: |  |
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| Date: |  |
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|  |
| Senior officer of the organisation (e.g. Chair, Chief Executive, Director, Treasurer): |
|  |  |
| Signature: |  |
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| Name in BLOCK LETTERS: |  |
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| Position in organisation: |  |
|  |  |
| Date: |  |