

Application Form

The Windsor, Ascot & Maidenhead LINK Community Chest Fund

Welcome!

Please complete this form after reading the Guide to the Windsor, Ascot & Maidenhead LINK Community Chest Fund.

You can complete this form if your project aims to meet one of the following criteria:

- 1. Gather people's views about health services or social care services in Windsor, Ascot or Maidenhead; or**
- 2. Improve access to existing services.**

1. Applicant Contact Details

Organisation:

Address of organisation:

(include postcode)

Your name:

Your role in the organisation: *if applicable*

Contact address:

*if different from organisation
(include postcode)*

Telephone number:

Email:

I prefer to be contacted:

By email:

By post:

2. About your organisation			
Is your organisation a registered charity?	Yes:	<input type="checkbox"/>	No: <input type="checkbox"/>
If yes, what is the registered charity number?			
Do you have a Constitution or set of rules?	Yes:	<input type="checkbox"/>	No: <input type="checkbox"/>
When did your group start?			
What does your group/organisation do and who does it help?			
Have you every received grant funding before from this or any other funder?	Yes:	<input type="checkbox"/>	No: <input type="checkbox"/>
If yes, please give details of from whom and when you received this funding.			
Is your organisation based in? Please tick all that apply.	<input type="checkbox"/> Ascot <input type="checkbox"/> Maidenhead <input type="checkbox"/> Windsor		
How many people are involved in running your group? <i>Please write numbers of each that apply.</i>	<input type="checkbox"/> Management Committee members <input type="checkbox"/> Full time staff <input type="checkbox"/> Part-time staff <input type="checkbox"/> Volunteers		
<i>(Where applicable)</i> Have your staff and volunteers been through the appropriate Criminal Records Bureau (CRB) checks?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

3. About the project / activity

Please describe the project/activity you would like to be funded:			
Is this for new work, or to continue funding existing work?	New: <input type="checkbox"/>	Existing: <input type="checkbox"/>	
When will the project start?			
When will the project finish?			
How much are you applying for? (You will need to give detailed breakdowns of these costs in Part 6)	£		
What will be the 'deliverables' of this project? <i>(i.e. What you will have to show at the end, e.g. a report, a DVD, new signage etc.)</i>			
How will you monitor this project and how will you know that it has been a success? <i>(e.g. We will have a final report, we will survey people involved, etc..)</i>			

4. Who your project will benefit

What is the need for your project and why is this important to your community?			
How many people will you contact during the course of this project?			
What will be the age range of the people involved in this project? <i>Tick all that apply</i>	<input type="checkbox"/> Under 16	<input type="checkbox"/> 16-18	<input type="checkbox"/> 18-24
	<input type="checkbox"/> 25-34	<input type="checkbox"/> 35-44	

4. Who your project will benefit

45-54
 55-64
 65 and over

Please indicate below the ethnic origin of people who will benefit from your grant

White
 Black or Black British
 British Caribbean
 Irish
 African
 Mixed Asian or Asian British
 White and Black Caribbean Indian
 White and Black African Pakistani
 White and Asian Bangladeshi
 Other (please write below)

5. Breakdown of costs
Please give a breakdown of anticipated costs for this project.

<u>Item:</u>	<u>Approximate cost:</u>
Payment of staff	£
Payment of consultants	£
Materials used	£
Administrations (e.g. postage, printing)	£
Training	£

5. Breakdown of costs

Please give a breakdown of anticipated costs for this project.

Travel	£
Other (please give details)	£
Total:	£

All finished!

Signed:	
Dated:	

Final Check:

Please ensure that you have included the following:

- ✓ A copy of the organisation's Constitution;
- ✓ An Equal Opportunities Policy and Child/Vulnerable Adults Protection Policy (if applicable);

Please send your completed application to:

Freepost RSAC-KULA-LBTX
Suite 3 First Floor
26-28 Market Place
Wokingham
RG40 1AP

The closing date for applications is 30th September 2010. You will be notified of the decision mid October 2010

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Existing:

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When will the project finish?

How much are you applying for?
(You will need to give detailed breakdowns of these costs in Part 6)

£

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(i.e. What you will have to show at the end, e.g. a report, a DVD, new signage etc.)

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