**A logo with green leaves

Description automatically generatedA close-up of a logo

Description automatically generated East Suffolk**

**Cost of Living**

**Community Grant Fund ’25-‘26**

**Application Form**

**Please read the Guidance and the whole form before you start.**

**The closing date is 9.00am on Monday, October 20th.**

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| --- |
| **Project Name:** |
| **Name of Your Organisation:** |
| **Your Name:**  **Tel. No:** |
| **Your email address:** |
| **Brief Description of your proposal (2 lines max.):** |
| **Will your project help people to:**  ***(please click in each BOX below that applies – a X will then appear):***  **Stay Warm  Maintain Wellness  Eat Well  Connected to Others**  **Other - Please specify HERE:** |
| **Funding Amount Requested: £**  **(Between £500-£2,000)** |
| **Geographical area (town/villages) to be covered by your project:** |

## ****Group/organisation details****

|  |  |
| --- | --- |
| **Group/organisation website or Facebook page:** | **Type of group/organisation:**  **Registered Charity No. (if applicable):** |

## ****Project details****

**The primary purpose of the grant is to keep people warm, well-fed and connected to others this winter. Please ensure that you FULLY evidence how you will do this in your answers below. You must deliver your project between November 2025 and March 2026 and all funding MUST be used on your project by March 31, 2026. If you have an underspend at this time, please see the GUIDANCE.**

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| **Brief description of the project (please provide enough detail for the Panel to understand what you are trying to achieve, why, and how it will be delivered):** |
|  |
| **What the funding that you are requesting will be spent on; how many people are likely to benefit and over approximately how many days *(eg we will run a three-hour session, to include a light lunch (soup and a roll or jacket potato) and an activity for example book club, music session or craft activities, for between 15 and 20 people at least once a week)*** |
|  |
| **Evidence the need for this project (local support) and the difference it will make, ie, how what you propose to do will help to keep people warm, fed and/or connected this winter:** |
|  |
| **How have you actively involved the community in planning/delivering this project and considered the needs of all members of the community including those on low incomes, without access to transport, with disabilities etc.:** |
|  |
| **Organisations or other groups that you are working with to deliver this (if any):** |
|  |

## ****Project costs****

**Please provide a breakdown of the TOTAL project/service/event resources needed and budget costs (add extra rows if necessary).**

**This MUST include any volunteer hours, donations of free materials and any discounts you have obtained, so that we can see the true cost of the project, not just those you still need to fund. This will enable us to then appreciate the added value gained by the Community Partnership for any funding awarded.**

**For Volunteer Hours, simply include the hours given by all volunteers. You should use the nationally recognised rate per hour £13.13), as in the example shown in the table below**

**Please list each item separately.** For example, please do **NOT** put **‘**Materials, venue hire and refreshments’ as one cost – this must be 3 separate amounts.

***Examples:***

|  |  |  |
| --- | --- | --- |
| **Venue hire** | **For 5 months @ £75 per month** | **£375.00** |
| **Staff Hours** | **DIRECTLY attributable:**  **Admin. 2 hours per month at £15.00 per hour for x 8 months** | **£240.00** |
| **Volunteer hours (in-kind support)** | **2 volunteers for 3 hours per day at £13.13 per hour, 1 day per week for 5 months (25 weeks)** | **£1969.50** |
| **Value of donated goods or value of discount** | **Cake donated free, valued at £50.**  **20% discount given on tea & coffee, worth £75.** | **£125.00** |
| **Energy costs** | **T**he increase in hours that the hall will be open is 3 per week. This represents 25% of the total estimated energy costs for the period from November to March inclusive which is: | **£375.00** |

***Now please complete the table below:***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item** | ***What does this include and approx. how long will it last*** | | **Cost** |  |
|  | **1** | | **£0.00** |  |
|  | **2** | | **£0.00** |  |
|  | **3** | | **£0.00** |  |
|  | **4** | | **£0.00** |  |
|  | **5** | | **£0.00** |  |
|  | **6** | | **£0.00** |  |
|  | **7 Volunteer Hours:** | | **£0.00** | **(E)** |
|  | **8 Donated Goods/Discount:** | | **£0.00** | **(F)** |
| **EXPENDITURE: Total cost of Outcome Proposal, etc, ie 1+2+3+4+5+6+7+8, etc.:** | | | **£0.00** | **(A)** |
| **Community Partnership Funding you are applying for:** | | **£0.00** |  | **(B)** |
| **Own Funds already held for THIS event/project, ie Bank/Building Society:** | | **£0.00** |  | **(C)** |
| **TOTAL Match-Funding Awarded by others but NOT in your Account yet:** | | **£0.00** |  | **(D)** |
| **TOTAL of Volunteer Hours (from above table):** | | **£0.00** |  | **(E)** |
| **TOTAL Value of Donated Goods/Value of Discount (from above table):** | | **£0.00** |  | **(F)** |
| **INCOME: TOTAL Funding available, if CP funding is approved, ie B+C+D+E+F:** | | | **£0.00** | **(G)** |
| **Funding Shortfall, if any, ie (A) minus (G):** | | | **£0.00** | **(H)** |

|  |  |
| --- | --- |
| **If there is a FUNDING SHORTFALL (H), please explain how/where you aim to make that up and when:** |  |

|  |  |
| --- | --- |
| **Costs - Further Info:** Only complete this box if you need to add further explanation regarding your costs: |  |

### ****Supporting documents****

**Please click in each BOX below that applies – a X will then appear:**

**Relevant policies and procedures in place for your Organisation**

**Constitution/set of rules  Child Protection Policy  Vulnerable Adults Policy**

**Health & Safety Policy  Equal Opportunities Policy**

**If you answered ‘NO’ to any of the above polices, please state why BELOW:**

**If you have evidence of these policies on a web-site, please ADD the web-link BELOW:**

**If not, PLEASE ENSURE YOU ATTACH COPIES OF ALL YOUR POLICIES WITH YOUR APPLICATION**

**IMPORTANT:** If you have previously received funding from East Suffolk Council and have not provided the required monitoring information, sadly your application will not be considered (PLEASE SEE THE GUIDANCE).

## ****Declaration****

The information you have supplied is being collected in order for East Suffolk Council to process your application for the funding in accordance with the grant scheme guidance.

Your Information will not be used for any other purpose unless East Suffolk Council obtains your consent or unless permitted by law.

Due to corporate retention requirements for financial information relating to this scheme, information relating to this application will be retained for 7 years.

**Where you have supplied any personal data relating to other individuals you confirm that you have met your own obligations under data protection law, including the requirements that data is shared only where a lawful basis exists, and the data subject is informed of their rights.**

Data will be processed and held securely and in accordance with the UK General Data Protection Regulations and the Data Protection Act 2018 (and any updates).

Further information about data protection and the full Communities Team privacy notice can be found on the East Suffolk Website:

<https://www.eastsuffolk.gov.uk/assets/Your-Council/Access-to-Information/Privacy-Notices/Communities-Privacy-Notice.pdf>  
I confirm that:

I have the authority to represent the organisation making this grant application.

* All information provided in this application form is correct and complete to the best of my knowledge.
* I confirm I am not withholding any information that would be likely to affect the outcome of the application.
* I shall inform East Suffolk Council if, prior to any grant funding being awarded, I become aware of any further information which might reasonably be considered as relevant in deciding whether to fund the grant application.
* I have informed all individuals whose personal data has been included in this application or supporting paperwork that their information has been collected and shared, and I have advised them of the relevant East Suffolk Council Privacy Notices.
* I understand that without prior reference to me the information given in this application may be submitted for checking against records held by East Suffolk Council or other organisations (such as government departments, other agencies, local authorities and the police) for the purposes of assessing my eligibility for grant funding or for the purposes of the prevention and detection of crime.
* I understand that where checks against other departments or organisations are made and discrepancies are identified, the Council may provide details of this application to those departments and organisations, and this may result in changes being made to those external records.
* I understand that data recorded by or on behalf of East Suffolk Council is subject to the Freedom of Information Act 2000, including information provided in relation to grant applications.

***Please ensure you have answered all questions before accepting and signing BELOW. This is important, as a failure to provide all the information may delay the processing of your application.***

|  |
| --- |
| **Please enter your name HERE (a typed name will suffice):** |
| **Date:** |

**PLEASE ENSURE YOU ATTACH COPIES OF ALL YOUR POLICIES WITH YOUR APPLICATION**

**(unless you have given a weblink to them)**

**Email your application form (as a WORD document please and any policies if applicable) to:**

[**grants@eastsuffolk.gov.uk**](mailto:grants@eastsuffolk.gov.uk)

***In the event of any queries, please email:*** [**communities@eastsuffolk.gov.uk**](mailto:communities@eastsuffolk.gov.uk)

***Hard copies can be submitted and returned to:***

**Funding Team, Riverside, 4 Canning Road, Lowestoft NR33 0EQ**

***Thank you for your interest in this Fund and your efforts in the community!***