

Small Grants Application Form – Youth Bursary Grants

Do you have a safeguarding policy, officials, a constitution and terms of reference and a bank account requiring two signatories.
[please √)
If no – are you partnered with an organisation who does?
(please √)
Do you offer paid for activities for young People ages 11 to 19 or up to 25 for people with SEND)
[(please √)
Do you currently have the capacity for new members/participants in this age category?
☐ (please ✓)
Would you like to join the mailing list for Salisbury Youth Provision Forum? The forum is a group of organisations providing activity, safe spaces and services for young people in Salisbury.
(please √)
Deadline for 2024 Applications is: 18 March 2024

Application should be returned to grants@salisburycitycouncil.gov.uk

Questions and enquiries to the same address or 01722 417100

Contact Name:	
Position:	
Organisation:	
Contact Address:	
Telephone Number:	
Email:	
Status of Organisation:	
Charity/Company number if (if applicable	Charity No: Company No:
Where do you deliver your activity? (Including post code)	
Has you organisation ben in operation for at least 12 months	Yes

1. Organisation Background

Are you currently in receipt of a Salisbury City Council Community Development Grant?	
What are the aims and objectives of your organisation (Mission or values statement, or terms of reference)	

What are the main activities of your organisation? If you are a new group describe the services/activities you plan to provide		
Do you have an equal opportunities or diversity and inclusion policy? If yes please attach with the application.	YES	

	Yes / No or NA
Are you part of a religious group	
If this application is for a school is this for a project that benefits the wider community and is in addition to statutory services?	
If application is from Education, health or social service establishment – is the project in addition to statutory services?	

2. Your application

Youth Bursary Grants must be used solely for enabling young people ages 11 to 19 to participate in learning, creative, physical or social activity they could not otherwise afford.

Why are you applying for this Grant and what evidence do you have of the need for bursary places for your activity?

What will your criteria for allocating Bursary's be?	
Does Your organisation currently offer bursary places and if so, how is it funded and do you publicly advertise them?	

3. An overview of how the bursary grant may be allocated.

Please give an overview of your current termly, per-session or membership fees for young people?

Activity	Cost per year	Cost Per Term

3.2 Please list any ap	oplications you ha	ave made for	funding from	other organis	ations
in the table below:					

How Much do you wish to apply for? (Maximum £750)

Total sum sought (Max £750)	How many young people could benefit from this fund across 12 months?

4.0 Further information enclosed Checklist

	Enclosed (please √)
A copy of your organisations bank statements for the previous three months (mandatory)	
Copies of all relevant Employer's, Building & Public Liability Insurance Certificate if appropriate (mandatory)	
A copy of your constitution and articles of association (or similar documents if the above do not exist, showing the organisations status)	
A copy of your organisations latest set of accounting statements (if any exist)	
Safeguarding policy	
Equality and diversity policy or statement	
Copies of any letters of support for your project	
Other (please list)	

iny of the above documow:	ents have not been	enclosed, please giv	e reasons why in the box

Declaration by the applicant

I/we declare that, to the best of my /our belief, the information on this application form and in any enclosed supporting documentation is correct

I/we declare that I/we have read the City Council's Grant Policy and believe to the best of my/our knowledge, that we meet the criteria set out by the Policy

I/we accept the following:

- I. That any false information we provide, even if provided in good faith, may lead to the withdrawal of the grant offered,
- II. That for applications of £1000 or more, a presentation is required by the applicant(s) to the City Council. This will be arranged prior to any meeting by the City Council Active Communities Team
- III. That any grant offered will be used only for the purpose set out in this application and
- IV. That we will provide reports on progress at the request of the City Council
- V. That should any grant offered, not be used in accordance with the terms and conditions set out by the City Council, I/we undertake on behalf of the organisation to repay the outstanding amount to the City Council on demand

Please be aware that the decision as to whether you have been successful in your application will be communicated to you shortly after the relevant council meeting

Signed :	
Name(s):	
Position(s):	
Date:	

SCC will not sell or rent your personally identifiable information to anyone, or use the data for any other purpose incompatible with the purpose for which it was originally collected (Medium Grants Application).

We will only hold your information for as long as necessary for the purposes (a year after the event)

I consent for my personal data being held for the purposes listed 5

Please remember:

If you have not answered all the relevant questions and sent all the information we require, we will return your application to you and this will cause a delay.

Please send your application to:

Communities Team, SCC, Bemerton Heath Centre, 58-60 Pinewood Way, Salisbury, SP2 9HU