application form

2019

Please read the application guide before completing this application form.

Questions in the application form should be answered by typing directly into the fields next to the questions. If you are unable to type into the form, then handwritten forms will be accepted.

Please return the form, along with supporting documents to **doncasterfund.uk@suez.com** or **Recycling Officer, Doncaster Environment Fund, SUEZ recycling and recovery UK, Sandall Stones Road, Kirk Sandall Industrial Estate, Doncaster DN3 1QR.**

The deadline for all applications is **5pm on Friday 07 June 2019.**

# SECTION ONE | applicant information

This is the information about your group / organisation and who will be the main contact for the project.

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| --- | --- |
|  | guidance notes |
| 1 | Name of your group / organisation | Click here to enter text. | This is the organisation which will take legal responsibility for the project if the application is successful and will sign the Grant Acceptance Agreement. |
| 2 | Applying group / organisation's main address | Click here to enter text. | This is the registered address of the organisation with whom a Grant Acceptance Agreement will be signed if the application is successful. It may be a different address to the one used for correspondence with the main contact which is requested below. |
| Questions 3 to 10 ask for details of the person who will be the main contact for all correspondence relating to your application. |
| 3 | Main contact title | Click here to enter text. | i.e. Mr, Mrs, Dr etc. |
| 4 | First name | Click here to enter text. |
| 5 | Last name | Click here to enter text. |
| 6 | Position | Click here to enter text. | e.g. Secretary, Treasurer, Chair Person |
| 7 | Main contact and correspondence address | Click here to enter text. | This should be the address of the main contact and will be used for all postal correspondence relating to the application. Please leave blank if this address is the same as provided in Q2. |
| 8 | Main contact telephone number | Click here to enter text. |
| 9 | Alternative main contact telephone number | Click here to enter text. | Please provide a second telephone number - this could be a mobile number or somewhere we can leave a message. |
| 10 | Main contact email address | Click here to enter text. | Please provide an email address which we can use for correspondence. |
| 11 | Organisation / group’s website or any other internet presence | Click here to enter text. | If the group does not have its own webpage it might have a Facebook page or be mentioned on other organisations websites. |
| 12 | Please provide a brief description of the applying group / organisation, including the type of organisation and the year it was established.  | Click here to enter text. | It would be helpful if you listed the main objectives of your group / organisation. |
| 13 | Charity number and/or company number | Click here to enter text. | If applicable – please note this is not essential for the possible provision of funding. |
| 14 | Does your organisation have the following policies / documents?If the response is yes – please supply copies of the documents with your application. |  | Yes | No | Please click to mark the boxes with ‘x’ to indicate as appropriate. This is a set of rules for your group. |
|  |  | A formal constitution | [ ]   |[ ]   |
|  |  | A health and safety policy |[ ] [ ]   |
|  |  | A safeguarding policy |[ ] [ ]   |
|  |  | Public liabilities insurance |[ ] [ ]  This is required if you are working with children, young people or vulnerable people  |
|  |  | An equal opportunities policy |[ ] [ ]   |
|  |  | An environmental policy |[ ] [ ]   |

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| 15 | Please provide the name, position and contact details for two other members of your group / organisation who are aware of this request for funding (i.e. Chairperson, Secretary, Treasurer, Committee Member, Trustee etc.) | **Contact one** |  |
| Name | Click here to enter text. |
| Position | Click here to enter text. |
| Email address | Click here to enter text. |
| Telephone number | Click here to enter text. |
| **Contact two** |  |
| Name | Click here to enter text. |
| Position | Click here to enter text. |
| Email address | Click here to enter text. |
| Telephone number | Click here to enter text. |

# SECTION TWO | about your project

This section is an opportunity to give us some detail about your project and what you are hoping to achieve.

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| 1 | What is the name of the project you are asking us to fund?  | Click here to enter text. | Please tell us the name of your project. i.e. Community Centre Kitchen Renovation |
|  2 | Which geographic area(s) will your project primarily benefit? | Click here to enter text. | Please mark the boxes with ‘x’ to indicate as appropriate. |
| 3 | Where will your project be delivered from? | Click here to enter text. | This is the location of your project. Please give a specific address and postcode if possible. |
| 4 | Which of the following application criteria will be met by your project? You can select more than one. | Click here to enter text. | * Strengthen the connection between the local community and the natural environment.
* Support recycling and waste reduction initiatives.
* Support projects whose aim is to reduce the negative impact individuals and groups have on the environment.
* Support the creation, enhancement or maintenance of local green spaces and urban areas such as parks, back alleys and local nature reserves.
* Improve local habitats for wildlife.
* Tackle local environmental concerns immediately such as dog fouling, litter or graffiti.
* Improve communal bin stores to encourage recycling.
* Support communication campaigns to support environmental initiatives.
* Support initiatives to re-use items, such as running a repair workshop.
* Require equipment for environmental projects, such as litter pickers or high visibility vests.
 |
| 5 | Please provide a description of your project. | Click here to enter text. | This is your main chance to explain your project.* Tell us about the piece of work you are asking us to fund and who the project will benefit
* What are the aims of your project?
* How does the project meet the objectives of the funding theme? (see the application guide)
* How do you know that your project is needed?
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| 6 | Anticipated project start date (month/year) | Click here to enter text. |  |
| 7 | Anticipated project end date (month/year) | Click here to enter text. |  |
| 8 | How will you measure the impact of your project | Click here to enter text. | How will you know you have made a difference? How will you show your achievements? |
| 9 | How long will it take for your project to reach completion? | 0-3 months | [ ]  |  | Please click to mark the boxes with ‘x’ to indicate as appropriate.  |
|  |  | 4-6 months | [ ]   |  |  |
|  |  | 7-12 months |[ ]   |  |

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| 10 | How did you hear about the Doncaster Environment Fund? | Website | [ ]  |  | Please click to mark the boxes with ‘x’ to indicate as appropriate.  |
|  |  | Twitter | [ ]   |  |  |
|  |  | Word of mouth |[ ]   |  |
|  |  | Other | [ ]  |  |  |

# SECTION THREE | financial information

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| --- | --- | --- | --- |
| 1 | Does your group / organisation have a bank / building society account in its own name? | Click here to enter text. | Please answer Yes or No |
| 2 | If ‘yes’ to question 1, do cheques have to be signed by two signatories? | Click here to enter text. |  |
| 3 | Does your group / organisation keep formal financial records and produce annual accounts? | Click here to enter text. | Please answer Yes or No |
| 4 | Please give us the details of the group’s bank / building society account into which we should pay a grant if you are successful. | Name of account | Click here to enter text. |
| Bank / building society number | Click here to enter text. |
| Account number | Click here to enter text. |
| Sort code | Click here to enter text. |

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| 5 | BUDGET: Please list the elements of the project that you are asking us to fund | Item (i.e. new tables, re-lay entrance pathway) | Cost (£) |
| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
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| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
| Click here to enter text. | £ enter amount |
|  | Total funding requestedSmaller projects fund £2,000Larger projects fund £5,000 | £ enter amount |

# SECTION FOUR | additional information or comments

If you would like to provide additional information or comments to support your application, please do so here (500 words maximum).

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| Click here to enter text. |

# SECTION FIVE | declaration

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| Please confirm on behalf of the applying organisation detailed in section one, that you are duly authorised to submit this application and that, to the best of your knowledge and belief, all answers to the questions are true and accurate. | Name | Click here to enter text. |
| Position | Click here to enter text. |
| Date | Click here to enter text. |

# SUBMITTING YOUR APPLICATION

If you have completed this application electronically, please email it to **doncasterfund.uk@suez.com.**

If you have completed a hard copy, please post it to **Recycling Officer, SUEZ Recycling and Recovery UK Ltd, Sandall Stones Road, Kirk Sandall Industrial Estate, Doncaster DN3 1QR.**

The deadline for all applications is **5pm on Friday 07 June 2019.**

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| ***The Doncaster Environment Fund is funded and managed by SUEZ Recycling and Recovery UK Ltd.*** |