

**Ards and North Down Borough Council**

**Heritage Project Funding Application Form 21/22**

**Current Deadline for application:**

**Monday 19th April 2021 at 11.59pm**

**Please read the guidance notes carefully before completing this form and remember to keep a copy of the completed application form for your own records.**

Completed applications should be returned by email by the closing date of **Monday 19th April 2021 at 11.59pm** along with the required documentation to:

[museum@ardsandnorthdown.gov.uk](mailto:museum@ardsandnorthdown.gov.uk)

Or by post:

North Down Museum

Town Hall

The Castle

Bangor

BT20 4BT

**In order to protect your personal data, we would advise that all email grant return applications be encrypted:**

**Instructions for file encryption:**

For Word:

1. Go to **File** > **Info** > **Protect Document** > **Encrypt with Password**.
2. Type a password, then type it again to confirm it.
3. Save the file to make sure the password takes effect.

For Mac:

1. On the **Word** menu, click **Preferences**.
2. Under **Personal Settings**, click **Security**  .



1. In the **Password to open** box, type a password, and then click **OK**.
2. In the **Confirm Password** dialog box, type the password again, and then click **OK**.
3. Click **Save**  .



**In order to communicate the password to a member of Council staff, please call (Mon to Fri 9am – 5pm) or text:**

**07833668616**

**SECTION 1 – ABOUT YOUR GROUP**

Name of Organisation (This *should be the same as the name on your constitution*)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Organisation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of contact person *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Contact Person’s address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Tel\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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In what year was your organisation started?

What type of organisation are you? (√)

*If you are a company AND a recognised charity, please tick both boxes*

|  |  |  |
| --- | --- | --- |
| Unincorporated club or association |  |  |
| Company limited by guarantee |  |  |
| Company limited by shares |  |  |
| Recognised charity |  |  |
| Trust |  |  |
| Other: Please specify  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

Recognised Charity Number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VAT Registration Number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your organisation have either a Constitution or a Memorandum and Articles of Association? (required)

Yes  No  If so, please attach a signed copy.

Does your organisation require Safeguarding (Child Protection) policies and procedures?

Yes  No  If so, please attach a copy.

What are the main aims of your organisation?

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What are the current activities of your organisation?

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What geographical area is covered by your organisation/project?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2 – PROJECT DESCRIPTION**

Title of project for which you are requesting funding \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| Please explain what your project is and what aspect of heritage you are focusing on. Maximum 1,000 words, (attach additional page if necessary) |

*When will your project start?*

*Must be at least 6 weeks from the deadline of submission of application*

*Day \_\_\_\_\_\_\_\_\_\_\_\_\_ Month \_\_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_\_\_\_*

*How long will the project last? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*How many people will benefit from the grant?*

*Public\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ Participants \_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Tell us about any expertise (professional or amateur) involved in the project if applicable. You **must** provide information on those involved.

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Please explain how your project will be managed; provide information on the person(s) who will be responsible for the management of the project and how the project will be publicised

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Please explain the outputs for this project, who will benefit from it and how they will benefit

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Please explain how the project, meets the strategic objectives of the Heritage Service (as listed on page 1 of the application)

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**SECTION 3 –PROJECT COSTS**

How much will your project cost and how much do you need from us?

|  |  |  |
| --- | --- | --- |
| Item or Activity | Total Cost | Requested Amount from AND |
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| Total expenditure |  |  |

**All projects require at least 20% match funding**, this can be in-kind. Please tell us where the rest of the funding will come from below. If you are expecting income from ticket/book/publication/DVD sales you should tell us how much you are charging

|  |  |  |
| --- | --- | --- |
| Source of other funding/Income | £ | Cash or in-kind |
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| Total (should be same total expenditure) |  |  |

**Organisations Current Financial Position**

Please give details of your most recent annual accounts *(these should be no more than one year old).*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Accounts for the year ending: | Day |  | Month |  | Year |  |
| Total (gross) income | £ | | | | | |
| Total expenditure | £ | | | | | |
| Profit or loss for the year | £ | | | | | |
| Savings (reserves, cash or investments) | £ | | | | | |

Please list all cheque/withdrawal signatories (as required by your constitution)

|  |  |
| --- | --- |
| Name | Position in Group |
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**SECTION 7 – ENCLOSURES & CHECKLIST**

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| --- | --- | --- |
| **I have enclosed the following ESSENTIAL documents** | **YES/NO** | **Comment** |
| CVs or information on historians, groups, technical staff, other personnel we propose to employ as part of the project |  |  |
| A signed copy of our constitution |  |  |
| Safe Guarding Policy (if required) |  |  |
| Signed accounts or Income and Expenditure Statement. |  |  |
| Current Account Bank statement |  |  |

**SIGNATURES**

WE NEED TWO SIGNATURES ON THIS FORM:

1. the designated contact person identified in Section 1 of this form,

AND

1. the Chairperson, Vice-Chair, Secretary or Treasurer

NOTE: (A) & (B) CANNOT BE THE SAME PERSON

**(A) The contact person should sign this section**

I confirm that, to the best of my knowledge and belief, all the information in this application form is true and correct. I understand that you may ask for more information at any stage of the application process.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(B) The Chairperson, Vice-Chair, Secretary or Treasurer must complete and sign this section.**

Title \_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree, on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (***insert group’s name***) that to the best of my knowledge and belief, all the information in this application form is true and correct.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please remember to keep a copy of this application form for your own records.**