

# Ward Flexibility Funding Application Form

Thank you for your interest in Stockport Council's Ward Flexibility Fund. To give your group the best chance of success please read the guidance notes and the questions on the application form carefully.

Please ensure that all boxes on this form are completed. You must also include all additional information that is requested.

## 1. About Your Organisation

1	Name	of Organisation/	Group

Lisburne School

3 sites

Main SiteHollywood SiteOverdale SiteHalf Moon LaneHardiman StreetPowicke DriveOffertonStockportRomileyStockportSK3 0BJStockportSK2 5LBSK6 3EF

#### 3. Main Contact Details (for correspondence)

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Name: Hayley Yates

Role: School Business Manager

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

**Email Address:** 

4. Please provide your bank ac	count details			
Account Name:				
Account Number:				
Sort Code:				
5. What is the status of your Or Please Tick	ganisation/ G	roup?		
A New Group		Voluntary Organisation		
A Registered Charity No.		Company Limited by Guarantee No.		
Applying for Charitable Status		Unregistered Association		
Friendly Society		Other (Please specify)	$\boxtimes$	
Housing Association		Special School		
6. Please describe the main act	tivities of your	Organisation/ Group		
o. I lease describe the main act	ivities of your	Organisation, Group		
		with a range of complex lea	•	
•		clusive education for all pup		
2		rriculum subjects in a safe, valued and celebrated. Indi	0	
		oils have access to stimulati		
•	•	hich promote communication	•	
esteem, responsibility and			,	
We have a caring team of	staff who are	e highly trained and experie	enced in	
		lifficulties. We offer our child		
class sizes, high levels of adult support and an environment where trained				
staff can offer a range of appropriate strategies and interventions to meet the				
complex needs of the pupi	IS			
7. When was your Organisation	n/Group estab	lished?		
	ap colab			

1987

of the grant agreement.	
A governance/management committee	$\boxtimes$
A Constitution/governing document/set of rules	$\boxtimes$
An Equal Opportunities Policy	$\boxtimes$
A Child Protection Policy (where necessary)	$\boxtimes$
A Health and Safety Public liability	$\boxtimes$

8. Does your organisation have the following policies and procedures in place?

If you are awarded a grant you will be required to send copies of all relevant documents as part

### 2. About Your Application

#### 9. Please give us a brief description of your proposed/planned project or activity

You may wish to include details of what activities will take place, where will it happen, how often and who will take part. If you are applying for equipment you can tell us what will it be used for and why is it needed.

We are looking to purchase 2 x defibrillators for our Lisburne school sites. We have one at the main site, however we do not have one at our Overdale or Hollywood sites. All of the 170 children who attend Lisburne, have Special Educational Needs and many have serious medical conditions.

If a child/adult were to take ill and need assistance, this would be stressful for any person, however for our children this would be extremely distressing and we would hope to deal with any situation that requires medical intervention to be efficient and timely.

The fund would assist us to gain the equipment, and also the much needed training and maintenance of the defibrillators.

#### 10. Who will benefit from this grant?

e.g. local residents, young people, older people and how?

To support the children, we have a larger number of staff in comparison to mainstream primary schools; at this current time, the number is 138. We also have staff who themselves have medical conditions, and it is crucial we have the correct lifesaving equipment to enable them to make a speedy recovery, should the situation arise. Parents/Carers of the children now that COVID restrictions have lessened are now coming into the school sites, and meeting such as Governor meeting are now taking place on school grounds. We hold clubs within the holidays to offer respite for parents, siblings play schemes, and we are planning a Child and Dads camping trip on the school grounds, therefore the equipment would also be available to all stakeholders of the school.

#### 10(a) How Many Stockport residents will benefit?

Approx 400 – 170 children, 130 staff members, other stake holders who will use the equipment if necessary

#### 10(b) Are there any restrictions on who will benefit from the funding?

No

#### 11. Your Project's Budget

Please provide a breakdown of cost for your project including VAT where applicable and submit any estimates for the purchase of equipment or work to be done.

The project will cost much more than the £1000 limit; in total it will be around £2500 for everything we would like to have across the 3 sites.

#### 11(a) How much will the project/activity cost in total?

£800 for each defibrillator and then the maintenance cost of £100 per machine for the pads/battery. Training we are hoping to receive at a reduced cost for the school

# 11(b) Tell us about other any other sources of income you have already applied for or raised so far in relation to this project

We raise money through our Friends of Lisburne charity – the monies that we raise is used for much needed equipment and resources for the ever-changing needs of our children

#### 12. How much are you applying for from the Ward Flexibility Budget?

£1000

# 12(a) If the amount you are applying for covers only part of the project/activity, then please tell us how do you intend to fund any shortfall?

We will do some further fundraising through Friends of Lisburne charity to put towards the costs

#### 13. What is the planned timescale for spending this grant?

Start ASAP Finish

## 3. Which Wards are you Applying to?

You may tick more than one box. Please note that no grant of more than £1,000 in totality will ordinarily be made.

Please tell us for each ward you wish to make an application to:-

- (a) how many people will benefit in that ward; and
- (b) what proportion of funding from your overall application you are seeking from each ward.

		Number of beneficiaries	How much funding you are seeking
Bramhall & Cheadle Hulme South Area C	ommittee		
Bramhall North			£
Bramhall South & Woodford			£
Cheadle Hulme South			£
Central Stockport Area Committee			
Brinnington & Central			£
Davenport & Cale Green			£
Edgeley & Cheadle Heath			£
Manor			£
Cheadle Area Committee			
Cheadle & Gatley			£
Cheadle Hulme North			£
Heald Green			£
Heatons & Reddish Area Committee			
Heatons North			£
Heatons South			£
Reddish North			£
Reddish South			£
Marple Area Committee			
Marple North			£
Marple South			£
Stepping Hill Area Committee			
Hazel Grove	$\boxtimes$		£
Offerton	$\boxtimes$	400 approx	£1000 total
Stepping Hill			£
Werneth Area Committee			
Bredbury & Woodley			£
Bredbury Green & Romiley			£
	Totals		£1000 total
	This total should ac	-	

**Question 12** 

Return to: Democratic Services Town Hall, Stockport SK1 3XE

## 4. Application Checklist and Declaration

1.	I am authorised to make this application on behalf of the above organisation		
2.	I certify that the information contained in this application is correct		
3.	If the information changes in any way I will inform Democratic Services accordingly.		
4.	I give permission for Democratic Services to contact my organisation and/or myself by phone, mail or e-mail with information about its activities and funding opportunities.		
5.	I/ we agree (if required) to attend an Area Committee meeting to explain how the proposal will improve the environmental, economic or social wellbeing of the area and to answer any questions.		
6.	Our details can be used for promotional purposes should this request be successful		
7.	I/We will use this grant for the proposed project/activities stated in our application.		
8.	I/we will not use the grant for any other purpose prior to contacting Democratic Services in order to seek authorisation.		
9.	I/we will provide appropriate proof of expenditure to Democratic Services, within 12 months from the Grant being made.		
10.	I/we will highlight the support of the Area Committee in recent publicity material.		
11.	I/we agree to providing information to assist in the future monitoring of the effectiveness of the funding including reporting back to the Area Committee on how the grant has been spent and what difference it has made.		
12.	I/we agree that the content of this completed application form and any supplementary information provided may be published on the Council's website and other publications as part of the application process.		
Print your name: Hayley Yates			
Signature:			
or if submitted electronically tick this box to signify your agreement to the above terms			
Date:	23/05/2022		