

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						
Social Events Activities.						
2. Organisation/Individual Address						
3. Main Contact Details (for correspondence)						
Title: MRS.						
Name: SHEILA WEVITT.						
Role: CHAIR.						
Address:						
Postcode						
Home Phone Number:						
Mobile Phone Number:						
Email Address:						

4. Please provide your bank a	account details	3	
Account Name:			
Account Number:			
Sort Code:	y.		
5. What is the status of your O Please Tick	rganisation/ G	Group?	
A New Group		Voluntary Organisation	Ty.
A Registered Charity No.		Company Limited by Guarantee No.	
Applying for Charitable Status		Unregistered Association	
Friendly Society		Other (Please specify)	
Housing Association		NON PROFIT.	
to socialize mote, the	tivities of your	Torganisation/ Group Lips which are every more and natter also a face	seople The and a book page.
7. When was your Organisation	/Group establ	es and nattes, also a face lished? available for access	5 to LATEST
First accounts and +	funding 2	orb set up by Stockpool	= Homes 91011
8. Does your organisation have if you are awarded a grant you we of the grant agreement.	the following	policies and procedures in place? o send copies of all relevant docume	nts as part
A governance/management com	mittee		
A Constitution/governing docume	ent/set of rules		
An Equal Opportunities Policy		y .	
A Child Protection Policy (where	necessary)		
A Health and Safety Public liabili	ty	4	

2. About Your Application

9. Please give us a brief description of your proposed/planned project of You may wish to include details of what activities will take place, where will it and who will take part. If you are applying for equipment you can tell us what and why is it needed.	happen, how often t will it be used for
We need promote the social side of the group we mk, printer, receipt books, Postage Stamps, Telephone eals	need copy Ample?
10. Who will benefit from this grant? e.g. local residents, young people, older people and how? Residents of Stockport all over 55 years who a coloctect and unnorable, who we keep in contact posters, phonecalls, and postage. 10(a) How Many Stockport residents will benefit?	
approximately 55 to 80 years.	
10(b) Are there any restrictions on who will benefit from the funding?	
Under 55 unless they are carers.	
11. Your Project's Budget Please provide a breakdown of cost for your project including VAT where app any estimates for the purchase of equipment or work to be done.	licable and submit
Printe Ink £30 per cartiloge 10 carterologes.	500 00.
Phone ealls Paper and Stamps, 11(a) How much will the project/activity cost in total?	200.00.
TOTAL.	1000.00.
11(b) Tell us about other any other sources of income you have already raised so far in relation to this project We have applicat to Followed Manchested for class yet not granted also skylight for trips which was	applied for or torks but as.
12. How much are you applying for from the Ward Flexibility Budget? We know Reddush and Heaton Messey know group. but our people come from our wards so so from all wards would se applicated. 12(a) If the amount you are applying for covers only part of the project/a please tell us how do you intend to fund any shortfall?	about the S.E.F. ma partiend
Self funding.	
13. What is the planned timescale for spending this grant?	
Start May 2023. Finish April 2024	
anners taletal (a)	

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.

each ward.	Number of beneficiari	
		are seeking
Bramhall & Cheadle Hulme South Area Commit	/	2
Bramhall North		£ 150.
Bramhall South & Woodford		I.
Cheadle Hulme South		£
Central Stockport Area Committee		_
Brinnington & Central	<u>G</u>	£
Davenport & Cale Green		£ 150.
Edgeley & Cheadle Heath		£
Manor	I	£ 150 °
Cheadle Area Committee		
Cheadle & Gatley	P	£
Cheadle Hulme North		£ 150
Heald Green	2	£
Heatons & Reddish Area Committee	~	
Heatons North		£
Heatons South		£ 150
Reddish North		£
Reddish South		£
Marple Area Committee		
Marple North		£ 150
Marple South		£
Stepping Hill Area Committee		-03
Hazel Grove	I	£ 150
Offerton	I I	£
Stepping Hill		£
Werneth Area Committee	170	
Bredbury & Woodley		£ 150 .
Bredbury Green & Romiley	<u> </u>	£
Т	otals	£ 1000.00

This total should add up to the figure you provided in Question 12



4. Application Checklist and Declaration

1.	I am authorised to make this application on behalf of the above organisation	4				
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.	Q				
6.	Our details can be used for promotional purposes should this request be successful	<u></u>				
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.	U				
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.	Q'				
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 y	our name:	1.0				
Signat	ture:	_				
or if submitted electronically tick this box to signify your agreement to the above terms						
Date:	6th April 2023.					