

# 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				
Heaton Norris Community Centre				
2. Organisation/Individual Address				
Love Lane, Heaton Norris, Stockport, SK4 1JA				
3. Main Contact Details (for correspondence)				
Title: Mr				
Name:				
Role: Chairperson				
Address:				
Postcode:				
Home Phone Number:				
Mobile Phone Number:				
Email Address:				

4. Please provide your bank acc	count details				
Account Name:					
Account Number:					
Sort Code:					
5. What is the status of your Org	ganisation/ G	roup?			
A New Group		Voluntary Organisation	$\boxtimes$		
A Registered Charity No.		Company Limited by Guarantee No.			
Applying for Charitable Status		Unregistered Association			
Friendly Society		Other (Please specify)			
Housing Association		(			
Youth Groups, women's groups, Self help support groups, Asylum and refugees support, Community Café fighting food poverty, Wellbeing Cafe, Creative Arts, Sign posting and partnerships sessions introducing families and individuals to key support services in Stockport					
7. When was your Organisation/ October 2005	Group estab	nsneu :			
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 of the grant agreement.					
A governance/management comr	mittee	$\boxtimes$			
A Constitution/governing docume	nt/set of rules				
An Equal Opportunities Policy		$\boxtimes$			
A Child Protection Policy (where i	necessary)	$\boxtimes$			
A Health and Safety Public liability	у	$\boxtimes$			

### 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 currently run a session on a Friday called feel good Friday which is open to all local residents especially older residents. Activities include but not restricted to gentle exercise, arts and crafts, tea dances, live entertainment and food. The session is very popular and we would like to increase the number of different activities we provide for example screen printing.

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

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

Local residents, young people and older people will continue to benefit by the weekly sessions, reducing isolation, creating community cohesion, building confidence, supporting healthy life styles. Learning new skills and signposting

## 10(a) How Many Stockport residents will benefit? 50

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.

£750.00
£250.00
£350.00
£150.00

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

£1500.00

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

£1500 from two separate wards

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?

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

Start 6th October 2023 Finish 31st December 2023

### 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.

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Bramhall & Cheadle Hulme South Area Commi	ttee	
Bramhall North		£
Bramhall South & Woodford		£
Cheadle Hulme South		£
Central Stockport Area Committee		
Brinnington & Stockport Central	$\boxtimes$	£1000.00
Davenport & Cale Green		£
Edgeley		£
Manor		£
Cheadle Area Committee		
Cheadle East & Cheadle Hulme North		£
Cheadle West & Gatley		£
Heald Green		£
Heatons & Reddish Area Committee		
Heatons North		£
Heatons South		£
Reddish North		£
Reddish South	$\boxtimes$	£500.00
Marple Area Committee		
Marple North		£
Marple South & High Lane		£
Stepping Hill Area Committee		_
Hazel Grove		£
Norbury & Woodsmoor		£
Offerton		£
Werneth Area Committee		
Bredbury & Woodley		£
Bredbury Green & Romiley		£
•	Totals	£1500.00

# 4. Application Checklist and Declaration

1.	I am authorised to make this application on behalf of the above organisation	$\boxtimes$		
2.	I certify that the information contained in this application is correct	$\boxtimes$		
3.	If the information changes in any way I will inform Democratic Services accordingly.	$\boxtimes$		
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.	$\boxtimes$		
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.	$\boxtimes$		
6.	Our details can be used for promotional purposes should this request be successful	$\boxtimes$		
7.	I/We will use this grant for the proposed project/activities stated in our application.	$\boxtimes$		
8.	I/we will not use the grant for any other purpose prior to contacting Democratic Services in order to seek authorisation.	$\boxtimes$		
9.	I/we will provide appropriate proof of expenditure to Democratic Services, within 12 months from the Grant being made.	$\boxtimes$		
10.	I/we will highlight the support of the Area Committee in recent publicity material.	$\boxtimes$		
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.	$\boxtimes$		
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.	$\boxtimes$		
Print y	our name:			
Signature:				
$\underline{\mathbf{or}}$ if submitted electronically tick this box to signify your agreement to the above terms				

Date: 07/08/2023