

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

Make a difference

2. Organisation/Individual Address

3. Main Contact Details (for correspondence)

Title: Ms

Name:Nadia Ali

Role: Chairperson

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

Email Address:

4. Please provide your bank account details

Account Name:

Account Number:

Sort Code:

5. What is the status of your O <i>Please Tick</i>	rganisation/ G	iroup?	
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			

6. Please describe the main activities of your Organisation/ Group

Make a Difference community group brings together and fosters understanding amongst local people from the diverse communities across Greater Manchester. We facilitate promote, support and develop recreational activities, events, fundraising, and project planning support, catering, and trips out. We welcome and support people with special needs and disabilities from all backgrounds to all our activities and events.

Our Aims: To support, raise awareness and deliver activities which actively promote and address health and well-being issues

- To provide a regular platform for local people to raise issues of health and well-being needs and signpost to relevant agencies
- To facilitate the weekly activities group
- To work in partnership with relevant local/regional & national organisations to enhance the local resources

7. When was your Organisation/Group established?

2017

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 committee	\times
A Constitution/governing document/set of rules	\times
An Equal Opportunities Policy	\times
A Child Protection Policy (where necessary)	\times
A Health and Safety Public liability Health	\times

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 would like to run some additional arts and craft sessions at a wellbeing café that we are currently running in Heald Green. The Friday Hub supports people who are in isolation, lonely, elderly, have mobility issues and may be experiencing anxiety or mental health issues.

10. Who will benefit from this grant?

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

Local residents and older people will benefit from these sessions. The Friday hub supports social interaction, mindfulness, reduce isolation and loneliness, create new friendships, provide access to specific services. Anxiety and mental health issues will decrease through creative activities. Healthy food will be available and healthy eating and cooking on a budget will form part of the activities.

10(a) How Many Stockport residents will benefit?

Approx 85 residents

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.

Arts & Craft equipment	£700.00
Venue hire	£500.00

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.

		Number of beneficiaries	How much funding you are seeking
Bramhall & Cheadle Hulme South Area Committee			
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	\boxtimes		£500.00

		S 61000	00
	Heald Green	∑ £1000.	.00
Heat	cons & Reddish Area Committee Heatons North	□ £	
	Heatons South	\Box \sim f	
	Reddish North	$\Box \qquad \tilde{\mathbf{L}}$	
		$\Box \qquad \tilde{\mathbf{L}}$	
Mor	Reddish South		
warp	ble Area Committee Marple North	□ £	
	•	\Box \sim f	
Ston	Marple South ping Hill Area Committee		
Siep	Hazel Grove	□ £	
	Offerton	⊡ □ £	
	Stepping Hill	\Box \tilde{E}	
Wer	neth Area Committee	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	Bredbury & Woodley	□ £	
	Bredbury Green & Romiley	£	
	,	Totals £1500	.00
		This total should add up to the figure you provided in Question 12	
4. A	pplication Checklist and	d Declaration	
1.	I am authorised to make this applica	tion on behalf of the above organisation	\boxtimes
2.	I certify that the information containe	ed in this application is correct	\boxtimes
3.	If the information changes in any wa accordingly.	y I will inform Democratic Services	\boxtimes
4.		rvices to contact my organisation and/or information about its activities and funding	\boxtimes
5.		Area Committee meeting to explain how the ntal, economic or social wellbeing of the	\boxtimes
6.	Our details can be used for promotic successful	onal purposes should this request be	\boxtimes

7. I/We will use this grant for the proposed project/activities stated in our application.

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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: Nadia Ali	
Signat	ure:	
<u>or</u> if su	ubmitted electronically tick this box to signify your agreement to the above terms	\boxtimes
Date:	07/08/2023	

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

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