



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

Merseyway Innovation Centre
21 – 23 Merseyway
Stockport
SK1 1PN

3. Main Contact Details (for correspondence)

Title:

Name:

Role: Chair

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

Email Address:

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Town Hall, Stockport SK1 3XE
democratic.services@stockport.gov.uk

4. Please provide your bank account details

Account Name:

Account Number:

Sort Code:

5. What is the status of your Organisation/ Group?

Please Tick

- | | | | |
|--------------------------------|--------------------------|----------------------------------|-------------------------------------|
| A New Group | <input type="checkbox"/> | Voluntary Organisation | <input checked="" type="checkbox"/> |
| A Registered Charity No. | <input type="checkbox"/> | Company Limited by Guarantee No. | <input type="checkbox"/> |
| Applying for Charitable Status | <input type="checkbox"/> | Unregistered Association | <input type="checkbox"/> |
| Friendly Society | <input type="checkbox"/> | Other (Please specify) | <input type="checkbox"/> |
| Housing Association | <input type="checkbox"/> | | |
-

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

To support the health and well-being of local people in Stockport through a variety of activities including arts, and crafts, youth provision, elderly groups, and social support cafes. To also support the community and individuals with their emotional and physical well-being through workshops, education, fun and learning, ensuring we are supporting the development of culturally appropriate activities.

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 | <input checked="" type="checkbox"/> |
| A Constitution/governing document/set of rules | <input checked="" type="checkbox"/> |
| An Equal Opportunities Policy | <input checked="" type="checkbox"/> |
| A Child Protection Policy (where necessary) | <input checked="" type="checkbox"/> |
| A Health and Safety Public liability | <input checked="" type="checkbox"/> |

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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.

Activities to take place:

Provide an informative and educational workshop focused on Bach Flower Remedies aimed at enhancing the emotional well-being of local residents. The workshop aims to introduce participants to a self-help support system comprising 38 remedies, offering a safe and effective means to address life challenges. With no contraindications, these remedies have garnered positive feedback in alleviating symptoms of anxiety, grief, and various emotional concerns.

The workshop will serve to educate attendees about Bach Flower Remedies as an alternative approach to emotional wellness. It will cover topics such as proper usage of the remedies, and selection of the most suitable ones, and provide participants with an educational booklet for reference. Additionally, attendees will have the opportunity to sample different remedies during the workshop. Ample time will be allocated for questions and answers, as well as individualised support for addressing specific emotional challenges and recommendations for personalised remedy selection.

Where:

The event will be delivered at Heaton Norris Community Centre.

How often:

Four workshops, each lasting three hours, with the objective of generating significant impact throughout Stockport. The effectiveness of these workshops will be used to inform future grant applications, thereby extending our reach and impact across the borough.

Who will take part:

A minimum of 45 residents across the Stockport borough.

10. Who will benefit from this grant?

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

The workshops will cater to a diverse group of local residents, including the elderly, refugees, asylum seekers, single parents, and individuals facing challenges related to poor mental health and emotional well-being. These sessions aim to enhance participants' well-being and extend their positive influence by educating parents on supporting their children through emotional struggles like anxiety, low mood, and low self-esteem. Attendees will gain access to ongoing support and guidance, empowering them to sustainably improve their health and well-being beyond the workshop.

10(a) How Many Stockport residents will benefit?

45 and then the educational materials participants will take home will enable them to support their family having a greater impact.

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

No restrictions, accessible to all.

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.

Budget:

Venue £45 total price agreed to run all events due to the goodwill of the venue manager supporting this initiative.

Refreshments £20

Marketing £100 one-off

Educational materials to continue support own emotional well-being at home, print £200

Bach remedy kit £231.00

One remedy to take away per person £50 in total

Specialist Well-being Facilitator Trained in Bach Remedies £350

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

£996.00

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

None

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

£996.00

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?

NA

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

Start March 2024

Finish July 2024

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 | <input checked="" type="checkbox"/> | 5 | £110.65 |
| Bramhall South & Woodford | <input checked="" type="checkbox"/> | 3 | £66.39 |
| Cheadle Hulme South | <input checked="" type="checkbox"/> | 5 | £110.65 |
| Central Stockport Area Committee | | | |
| Brinnington & Stockport Central | <input checked="" type="checkbox"/> | 3 | £66.39 |
| Davenport & Cale Green | <input checked="" type="checkbox"/> | 3 | £66.39 |
| Edgeley | <input checked="" type="checkbox"/> | 3 | £66.39 |
| Manor | <input type="checkbox"/> | | £ |
| Cheadle Area Committee | | | |
| Cheadle East & Cheadle Hulme North | <input type="checkbox"/> | | £ |
| Cheadle West & Gatley | <input type="checkbox"/> | | £ |
| Heald Green | <input type="checkbox"/> | | £ |
| Heatons & Reddish Area Committee | | | |
| Heatons North | <input checked="" type="checkbox"/> | 5 | £110.65 |
| Heatons South | <input checked="" type="checkbox"/> | 5 | £110.65 |
| Reddish North | <input checked="" type="checkbox"/> | 5 | £110.65 |
| Reddish South | <input checked="" type="checkbox"/> | 5 | £110.65 |
| Marple Area Committee | | | |
| Marple North | <input type="checkbox"/> | | £ |
| Marple South & High Lane | <input type="checkbox"/> | | £ |
| Stepping Hill Area Committee | | | |
| Hazel Grove | <input checked="" type="checkbox"/> | 3 | £66.54 |
| Norbury & Woodsmoor | <input type="checkbox"/> | | £ |
| Offerton | <input type="checkbox"/> | | £ |
| Werneth Area Committee | | | |
| Bredbury & Woodley | <input type="checkbox"/> | | £ |
| Bredbury Green & Romiley | <input type="checkbox"/> | | £ |
| Totals | | | £996.00 |

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



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 Town Hall, Stockport SK1 3XE
 democratic.services@stockport.gov.uk

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:

Signature:

or if submitted electronically tick this box to signify your agreement to the above terms

Date: 13.03.2024

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