



# 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

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### 1. Name of Organisation/ Group

Pakistani Resource Centre

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### 2. Organisation/Individual Address

First floor  
254a Finney Lane  
Heald Green  
SK8 3QD

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

Title:

Name:

Role: Manger

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

Email Address:

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[democratic.services@stockport.gov.uk](mailto:democratic.services@stockport.gov.uk)

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#### 4. Please provide your bank account details

Account Name:

Account Number:

Sort Code:

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

*Please Tick*

- |                                |                                     |                                  |                                     |
|--------------------------------|-------------------------------------|----------------------------------|-------------------------------------|
| A New Group                    | <input type="checkbox"/>            | Voluntary Organisation           | <input type="checkbox"/>            |
| A Registered Charity No.       | <input checked="" type="checkbox"/> | Company Limited by Guarantee No. | <input checked="" 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"/>            |                                  |                                     |

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

Our current work is in Manchester and Trafford where we provide the following services:

Mental Health

Healthy Lifestyle

Benefits and Housing advice

We specialise in providing services for the South Asian communities. Our services are culturally and religiously sensitive. We ensure services are Available, Accessible, Appropriate and Effective. Our staff speak several South Asian languages including Punjabi, Urdu, Hindi, and English.

We moved to Heald Green last year in March. We want to replicate some of our services in Stockport, especially for women from BME communities who are isolated due to various reasons.

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#### 7. When was your Organisation/Group established?

Pakistani Resource Centre is a registered charity established in 1966 to serve South Asian (Pakistani, Indian and Bangladeshi) communities across Greater Manchester.

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#### 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.*

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

## 2. About Your Application

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### 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 want to set up a Peer Support Group for women from the South Asian background who are isolated, may have minor mental health or emotional needs, victims of domestic abuse and carers. The group will run once a week for 2 ½ hours on a set day and time each week. The group will be a good opportunity for individuals to reduce isolation, socialise, learn new skills, learn about healthy eating and how it is linked to healthy lifestyle. We will invite people from different sectors to deliver a talk. For example, we will invite someone from NHS to talk about health screening and benefits of it, first aid training, personal safety, how to reduce stress are some of the topics we will cover. We will encourage people to walk daily as it is linked to healthy living. As a taster session we will take attendees to the local park in Heald Green for a walk.

Initial sessions will be held at Stockport Muslim Foundation Centre, 246 Finney Lane, Heald Green. We may change venue after consultation with the attendees.

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

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

Women aged 18 and above will benefit from this grant.

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

50

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

The project will target South Asian women.

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### 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.*

Bank worker cost: 2.5 hrs x £15 = £37.50 per week = £450 per quarter

Venue hire cost: 2.5 hrs at £10 per hour = £25 per week = £300 per quarter

Refreshments: £10 per week = £120 per quarter

Stationery: £30 per quarter

Guest speakers cost: £100

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

£1000

#### 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

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N/A

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**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?**

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

Start 01/05/2024

Finish 31/07/2024

### 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
<b>Bramhall &amp; Cheadle Hulme South Area Committee</b>			
Bramhall North	<input type="checkbox"/>		£
Bramhall South & Woodford	<input type="checkbox"/>		£
Cheadle Hulme South	<input type="checkbox"/>		£
<b>Central Stockport Area Committee</b>			
Brinnington & Stockport Central	<input type="checkbox"/>		£
Davenport & Cale Green	<input type="checkbox"/>		£
Edgeley	<input type="checkbox"/>		£
Manor	<input type="checkbox"/>		£
<b>Cheadle Area Committee</b>			
Cheadle East & Cheadle Hulme North	<input checked="" type="checkbox"/>	10	£200
Cheadle West & Gatley	<input checked="" type="checkbox"/>	10	£200
Heald Green	<input checked="" type="checkbox"/>	30	£600
<b>Heatons &amp; Reddish Area Committee</b>			
Heatons North	<input type="checkbox"/>		£
Heatons South	<input type="checkbox"/>		£
Reddish North	<input type="checkbox"/>		£
Reddish South	<input type="checkbox"/>		£
<b>Marple Area Committee</b>			
Marple North	<input type="checkbox"/>		£
Marple South & High Lane	<input type="checkbox"/>		£
<b>Stepping Hill Area Committee</b>			
Hazel Grove	<input type="checkbox"/>		£
Norbury & Woodsmoor	<input type="checkbox"/>		£
Offerton	<input type="checkbox"/>		£
<b>Werneth Area Committee</b>			
Bredbury & Woodley	<input type="checkbox"/>		£
Bredbury Green & Romiley	<input type="checkbox"/>		£
<b>Totals</b>		<b>50</b>	<b>£1000</b>

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



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## 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: 26/03/2024

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