

## 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

S.E.A.	Social	Events.	Motivitu
2. Organisation/Individu	al Address	1 1920 1000	
3. Main Contact Details	(for correspond	ence)	
Title: MRS			
Name: SHEILA	NEVIT.		
Role: CHAIC HOI) Address:			
Postcode:			
Home Phone Nu			
Mobile Phone Nu			
Email Address:			

4. Please r			٧
Account Na			
Account Nu		a	
Sort Code:			
5. What is the status of your On Please Tick	rganisation/ G	roup?	
A New Group		Voluntary Organisation	
A Registered Charity No.		Company Limited by Guarante No.	е
Applying for Charitable Status		Unregistered Association	
Friendly Society		Other (Please specify)	
Housing Association			
6. Please describe the main ac we have a coffee wond mill eate to p and islated. We organisation 7. When was your Organisation We ware estables	n/Group estab	lished?	E the walnerable side and
8. Does your organisation have if you are awarded a grant you we of the grant agreement.	e the following vill be required	policies and procedures in p to send copies of all relevant do	lace? cuments as part
A governance/management co	mmittee		
A Constitution/governing document	ment/set of rule	s v	
An Equal Opportunities Policy			
A Child Protection Policy (when	re necessary)		
A Health and Safety Public liab	oility		

## 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 spooded like to take 57 vulnerable and
and why is it needed. We exocuted like to take 57 vulnerable owned cookect people over 50 of over to a christmas olinned for those who have no family to celebrate with.
who have no family to celebrate with.

10. Who will benefit from this grant?
e.g. local residents, young people, older people and how?
Oblet Stockport Tescolents who are ecthed vulconable of are sufferma from Conclus and isolorton

10(a) How Many Stockport residents will benefit?

37.

They have to be 50 years of over to gradefy and also live in the Stockport area.

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.

57 people of \$15.50 per person which equal \$283-50

Some of which will be self funding

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

\$885.50

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

Self funding

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

£500

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?

Self funding

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

Start Dec 2024 Finish Dec 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.

each ward.		Number of beneficiaries	How much funding you are seeking
Bramhail & Cheadle Hulme South Area Co	ommittee		0.05.00
Bramhall North		4	£ 35 .08
Bramhall South & Woodford			£
Cheadle Hulme South			£
Central Stockport Area Committee			£ 43 . 85
Brinnington & Stockport Central		<b>⊡</b> 5	£ 70 · 16.
Davenport & Cale Green		<u> </u>	
Edgeley		<b></b> ₹8	£ 70 · 16.
Manor		23	£ 26.31
Cheadle Area Committee			•
Cheadle East & Cheadle Hulme North	1		£
Cheadle West & Gatley		2.	£17-54
Heald Green	- week	图1	£ 8.77
Heatons & Reddish Area Committee			C
Heatons North			£
Heatons South		2.	£17.54.
Reddish North			£ 8 .77.
Reddish South		10	£87.81
Marple Area Committee			•
Marple North			£
Marple South & High Lane			£
Stepping Hill Area Committee		1	£17 · 54.
Hazel Grove		4	~
Norbury & Woodsmoor			£
Offerton		☑3	£ 26 · 31.
Werneth Area Committee			C
Bredbury & Woodley			£ 70 + 16.
Bredbury Green & Romiley	Mar	R 8	
	Totals	<i>5</i> 7.	£ 500 -00.
	This total shou the figure you <b>Question 12</b>		1

Return to:
Democratic Services
Town Hall, Stockport SK1 3XE
democratic.services@stockport.gov.uk

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	9
7.	I/We will use this grant for the proposed project/activities stated in our application.	W .
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 y	ourname: SHEILA NEVITT	
	ubmitted electronically tick this box to signify your agreement to the above terms	
Date:	4th Odeber 2024	

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