



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

Autisk

2. Organisation/Individual Address

Adswold Youth Centre

Neston Grove

Stockport

SK3 8PH

3. Main Contact Details (for correspondence)

Title: Mrs

Name: Janet Bennett

Role: CEO

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

Email Address:

Return to:
Democratic Services
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

Providing social groups, activities, events and holiday club sessions for children and young people who have disabilities

7. When was your Organisation/Group established?

August 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"/> |

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 are very aware that there is very little in place currently for children and young people with SEND to attend and enjoy. We want to start some inclusive SEND sessions and activities in the area to help give the children a place to go that is safe, non judgemental and inclusive

We have selected reddish wards and Heatons wards as we are very conscious that for families in these areas it is hard to travel and get to our main centre in Adswold especially by public transport which has a huge sensory overload effect on SEND children. We consulted with local councillor Rachel about how much need there is for SEND sessions in the area and also consulted with a lot of families on various Facebook groups.

We expect on average 15-20 children and young people to attend each of our sessions plus 5-10 parent/carers who will benefit by attending with their children and meeting others in same situation as them

10. Who will benefit from this grant?

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

Children , young people , parents

10(a) How Many Stockport residents will benefit?

100-200 roughly based on 15-20 children and their parent/carers attending our regular twice a week sessions we have to offer we expect a high number of referrals to these sessions from local school, Stockport social care and word of mouth

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

No, we recognise that a lot of children have non diagnosed SEND and want to ensure we reach them to

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.

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

£4560 – rental for 4 sessions a week x 38 weeks
£13680- session lead/co ordinator
£500- equipment/resources
Total -£18740

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

We are currently applying to various funds in order to raise enough to cover cost of these sessions

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

£1000- would help us set up and make a start

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?

Fundraising, funding bids

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

Start	Feb 2025
Finish	ongoing

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 type="checkbox"/>	£
Bramhall South & Woodford	<input type="checkbox"/>	£
Cheadle Hulme South	<input type="checkbox"/>	£
Central Stockport Area Committee		
Brinnington & Stockport Central	<input type="checkbox"/>	£
Davenport & Cale Green	<input type="checkbox"/>	£
Edgeley	<input type="checkbox"/>	£
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"/>	£250
Heatons South	<input checked="" type="checkbox"/>	£250
Reddish North	<input checked="" type="checkbox"/>	£250
Reddish South	<input checked="" type="checkbox"/>	£250
Marple Area Committee		
Marple North	<input type="checkbox"/>	£
Marple South & High Lane	<input type="checkbox"/>	£
Stepping Hill Area Committee		
Hazel Grove	<input type="checkbox"/>	£
Norbury & Woodsmoor	<input type="checkbox"/>	£
Offerton	<input type="checkbox"/>	£
Werneth Area Committee		
Bredbury & Woodley	<input type="checkbox"/>	£
Bredbury Green & Romiley	<input type="checkbox"/>	£1000
Totals		£

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



Return to:
 Democratic Services
 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: Janet bennett

Signature:

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

Date:
04/12/24

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