Gender and Sexual Orientation Partnership

Small Grants Application Form 2023-24

Guidance for completing the application

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| **Name of Group** |  |
|  |  |
| **Contact address** |  |
|  |  |
| **Telephone** |  |
|  |  |
| **Email address** |  |
|  |  |
| **Your Project** | |
|  |  |
| **What is the main aim of your group or organisation?** |  |

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| --- | --- |
| **What activity will you do?**  *Which of our priority areas will your activity address?* |  |

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| **Who is your activity for?**  *Which communities will you work with?* |  |
|  |  |
| **How long will your activity run for?**  *How many sessions or weeks? When will it be complete?* |  |
|  |  |
| **Where will your activity take place?**  *Do you have a venue in mind?* |  |
|  |  |
| **How many people will you work with?**  *How will you recruit participants?* |  |
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|  |  |
| **Needs Identified: How have you considered the voices of your community in planning your project?** *Include evidence of community feedback in your application* |  |
|  |  |
| **What difference will your activity make?**  *Give examples of how your activity will make a difference to the people you will work with. How will they benefit?* |  |
|  |  |
| **How will you measure impact?**  *How will you know that you have made a positive change?* |  |
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| **Policies**  Confirm you have the required policies and how you ensure they are up to date? |  |

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| **Project Costs** | | | | | | | | | | |
| **Grant amount requested** | **£** | |  | | | | | |  | |
|  |  | | | | | | | | | |
|  |  | | | | | | | | | |
| **Budget summary**  *List what the grant money will be spent on. Include costs for staff & volunteers.*  *Single items over £250 require quotes from two places.* | Item | | | Amount £ | |  | Item | | | Amount £ |
| *Breakdown the costs, for example:*  *Volunteer expenses - 2 volunteers at £5 per session for 8 sessions (2x£5x12 = £120)*  *Room hire - £40 per session for 8 sessions* | | | *£120*  *£320* | |  |  | | |  |
|  |  | | | | | | | | | |
| **Confirmation and Endorsement** | | | | | | | | | | |
| **Details of person completing form**  **Name of Trustee from your organisation** | **Name** |  | | | **Role in Organisation** | | |  | | |
|  |  | | |  | | |  | | |
| **Name** |  | | | *This trustee cannot be the same person as, and must be unrelated to, the person completing the form.* | | | | | |
|  | | | | | | | | | |