Application process

This form should be used to apply for funding from any of the five Community Engagement Forums.

Before completing this form, please ensure you check the project funding criteria and application guidance form. You can also get support with completing the application by e-mailing cefadmin@selby.gov.uk. Whether you are applying for a small grant or project funding you will need to complete section 1 and 3 of this application form and then either a grant information form or a project brief in section 2.

This is an application only and will be subject to an assessment process – we cannot guarantee support. The Community Engagement Forum Partnership Board will consider every application received. Please see the decision making flowchart to understand the process your application will go through.

After completing and saving, please send the form by email to cefadmin@selby.gov.uk. We would prefer not to receive applications by post, please.

We will let you know if you have been successful by email unless requested in writing.

Which Community Engagement Forum is this application to?

Please indicate which Community Engagement Forum this application is being submitted to (when applying to more than one CEF you will need to complete a separate application form for each CEF).

| Central CEF | $\sqrt{}$ |
|--------------------------|-----------|
| Eastern CEF | |
| Southern CEF | |
| Tadcaster & Villages CEF | |
| Western CEF | |

Section one: About your organisation

| Please tick this box to confirm that you have discussed your application for |
|---|
| √ I funding with the relevant Development Officer (this is a requirement of all CEF |
| funding applications). Contact details for both Development Officers can be |
| viewed on the Selby District Council website. |

Q1.1 Organisation name

| Selby District Disability Forum | |
|---------------------------------|--|
| | |

Q1.2 Organisation address

| What is your organisation's registered ac | Idress, including postcode? |
|---|-------------------------------|
| Community House, Portholme Road, Selby, | North Yorkshire, YO8 4QQ |
| Telephone number one | Email address (if applicable) |
| 07555598752 | Sddf.uk@gmail.com |
| Telephone number two | Web address (if applicable) |
| 07724900518 | www.sddf.co.uk |

Q1.3 Main contact details

Give us the details of the person in your organisation that is the main contact.

| Title | Forenames (in full) | Surname |
|----------------------------------|---------------------|---------|
| Mrs | Joanne | Scott |
| | | |
| Position or job title | | |
| Disability Awareness Coordinator | | |
| | | |

Q1.4 Organisation type

What sector does your organisation fit into?

| Social enterprise | |
|------------------------------|--|
| Charity | |
| Voluntary or community group | |

| Other | Please describe | |
|-------|-----------------|--|
| \A/I | | |

When was your organisation set up?

| Day | 11 | Month | June | Year | 2016 |
|-----|----|-------|------|------|------|
| | | | | | |

Q1.5 Reference or registration numbers

| Charity number | | |
|------------------------|----------|---|
| Company number | 10227315 | (Not-for-profit Community Interest Company) |
| Other (please specify) | | |

If you are an unincorporated association and not registered with the Charity Commission, please tick this box and send us a copy of your governing documents (for example, constitution or set of rules) with your application.

Q1.6 Is your organisation VAT registered?

| 100 | Yes | | No | $\sqrt{}$ |
|-----|-----|--|----|-----------|
|-----|-----|--|----|-----------|

Please note that applications <u>cannot</u> be used to support expenditure on VAT reclaimable by the applicant from HM Revenue and Customs.

Q1.7 Please list all other bodies that you have, or plan to apply to for funding

| Name of Body / Organisation | Funding Awarded/Requested* |
|--|----------------------------|
| No other funders are currently being considered for this project | |
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*Where you have not yet applied to the body, please indicate the amount you intend to apply for and write 'indicative' to the side of the amount.

Section Two: Grant information or Project Brief (separate document) Please see our Project Brief.

Please see the Allocation of Funding Framework and application guidance form to check whether you will need to complete a Grant information form or a Project Brief.

Q2.1 What is the title of your application?

| Central CEF: Disability Positivity | | | | |
|--|--|--|--|--|
| Q2.2 Please list the details of your application (500 words limit) | | | | |
| Please see our Project Brief. | | | | |
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Q2.3 Is there a specific date your applications needed to be funded by?

| Please see our Project Brief. | |
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Q2.4 Which two objectives in the specific Community Development Plan will your application meet? (250 word limit for each objective)

| Which objective? | How will you achieve this? |
|------------------|-------------------------------|
| Objective 1: | |
| | Please see our Project Brief. |
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| Objective 2: | |
| | Diagon and any Dyningt Dying |
| | Please see our Project Brief. |
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Q2.5 Please outline how the application will benefit the specific CEF area and why there is a need for your proposal? (500 word limit)

| Please see our Project Brief. | | |
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Q2.6 How much funding are you requesting?

Please provide a breakdown of the different cost elements associated with your application:

| Cost Element | Cost (£) | |
|--|----------|--|
| Please see our Project Brief. | | |
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| Total Cost | | |
| Q2.7 Is the total cost of the application more than the amount you are requesting? Yes No If yes, where will you get the other funding from and has this been secured? | | |
| Please see our Project Brief. | | |
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