Central Dodworth Kingstone Stairfoot Worsbrough

The primary objective of the Ward Alliance is to encourage Social Action across Barnsley.

Social Action is defined as: 'people helping people' / 'practical action in the service of others.'

Please fill in the project proposal form below and then send it to the address as stated on the guidance notes. You may wish to discuss the outline of your project with a member of the Ward Alliance, or Community Development Officer, for some initial feedback before submitting your proposal.

Before completing this form, please read the Ward Alliance Fund Guidance Notes.

1. About Your Group		
1.A Name of your Group		
1.B Which village and ward will be covered by your project?		
1.C What does your group do?		
2. About Your Project		
2.A Name of your Project Give your project a short title so it can be easily identified	2.B Which Ward Alliance Priorities does this project meet?	2.C How much funding do you need?
277.1.72		
2.D ProjectSummary What will you do with the money if succ	essful? (No more than 150 words)	

Central	Dodworth	Kingstone	Stairfoot	Worsbrough
---------	----------	-----------	-----------	------------

2.E What is the project start date and when will it be completed? Is the timetable for the project's delivery realistic?				
2.F Will the volunteers working	ng on the project	2.G Do you have	e any insurance?	
be subject to a DBS check?		If you don't, please of that may be required	letail how you will meet any insurance needs	
2 The Lead Commun.	-14			
3. The Local Commun	_		0 0 Bl 4-11 however	
3.A Will you be working with any other groups or	the community		3.C Please tell us how your project will help to promote	
organisations with this project? If yes, please give details	difference will	it make?	equality and diversity in the community?	



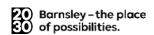
Central	Dodworth	Kingstone	Stairfoot	Worsbroug
4. Match Fu	unding			
	iding a match for this on 4.E below. If not, please contin		YES	NO
Please give us details on	making up the match what you will contribute (volunte eer time is calculated at £13.70 p	eer hours, gifts in kind, cash donat	tions etc.) to raise the same am	ount you are requesting in funding
How many peopl volunteering tow project?				
How will the volu directly contribut project?				
How many new vibe contributing to project?				
In-kind contribut	ions:			
Cash donations:				
5. How Will	Your Grant Be Sp	pent?		
Item		Purchased From		Amount (£)
			Total Spe	

Central Dodworth Kingstone Stairfoot Worsbrough

6. Declaration

Please read the Declaration below in full, before completing your details and signing on the next page.

- I hereby certify that the information contained in this application form is accurate, and that I have the authority/permission of our group to apply for these funds
- I acknowledge that in the event of a Grant being made, the application form and guidance notes will be the basis of a binding agreement.
- Any award made will be used only for purposes for which it is granted, if it is found during monitoring that any item(s) funded are ineligible, I will return any money requested immediately.
- The monitoring information required by BMBC will be provided as and when requested. All financial records, receipts etc. will be kept for at least 7 years following any award.
- Applicants will be required to provide copies of receipts of expenditure within
 6 months of any award or evidence of action if an order is placed.
- Any unspent monies must be returned within 6 months. Please contact the team to arrange a BACs transfer.
- That arrangements for any insurance that is needed for your activity has been put in place
- Any media or promotional work must include the Love Where You Live logo
- Groups receiving awards may be required to report to future Ward events about the benefits received from the grant.
- Barnsley MBC is subject to the Freedom of Information Act 2000. This law
 gives the general public the right of access to information held by the
 Authority. Some information may be exempt from disclosure such as bank
 account details. The authority will consult with third parties who supplied the
 information but the final decision on the release of information rests with the
 Authority.
- I understand that the failure to comply with the above requirements may result in the recovery of money paid.





	Central	Dodworth	Kingstone	Stairfoot	Worsbrough
--	---------	----------	-----------	-----------	------------

7. Personal Informa	tion and Signature	
Group Name		
Main Contact		
Address & Post Code		
Email Address		
Telephone		
point. This must be da	ted within the last 3 mon	oup's bank statement will be requested at this out this and show the account name and details.
		* Please ensure that Section 6 is fully completed

Completed By:		
Name		
Signature (Electronic signatures are accepted)		
Date		

* Please ensure that Section 6 is fully completed. If your project is approved it may delay a payment being made to you if it is not. This section of the form will not be made available to the approval panel.

If you would like us to add your group's details to our community database, **please tick the below box**. If you would like us to remove your details at any time, please contact the team. Your details will not be shared with our partners or any other organisation, without prior consent with yourselves

Please add the details of my group to the Community Database

Ward Alliance Fund Application Form

Central	Dodworth	Kingstone	Stairfoot	Worsbroug
8. Approval	Process		[For Approval Office	e Completion]
Project Title:			Approval Amount:	
_			•	
At the	Ward Allian	nce meeting, the follov abstained from voting:		n interest and
I, the Cha successful*/u	ir of the above Ward Allian unsuccessful* with suppo meeting held on	ort from a majority of V	Vard Alliance Members	present at the
Signature		Date		
[Chair of the me	eeting on behalf of the W	ard Alliance] *delete	as appropriate	
I confirm that th	nis application fulfils the	WAF Critera:		
Signature		Date		
[Area Council N	lanager]			
Area Council Ma	anager Comments:			
Alca Coolicii Mic	anager comments.			
I authorise the p	project, and the request f	or the WAF grant, as o	outlined in the application	n:
Signature		Date		

[Service Manager/Assistant Director/Executive Director Communities Directorate]

