# **Grant summary**

## Organisation

Weston Friends

### Funding request

Funding is requested for organising clubs for people of all ages, including a breakfast club and after school club.

Total cost £200/£300

Grant requested £200



## Macclesfield Town Council Small Community Grant application form

Grants up to £250

Community for Voluntary Services Cheshire East (CVSCE) is a registered charity and independent organisation that provides support and services to groups. CVSCE provides support to Macclesfield Town Council's grant programme by reviewing completed grant application forms to ensure they meet the criteria set out in the Council's Grants and Funding Policy. For more information, please refer to the policy.

CVSCE can also offer guidance on completing the application form.

### Contact details

Please complete table 1.

Table 1 Contact details

Applicant name:	
Organisation:	
Address:	
Contact number:	
E-mail address:	

### **Project details**

Please complete table 2.

Table 2 Project details

Organisation:	
Location of organisation:	12 GILCHRIST AVENUE WESTON ESTATE MACCLESFIELD SKIL SUH
Project name:	WESTON COMMUNITY HUB
Short project description:	OPENED AFTER 4YEARS WHAT TO DO BREAKFASTCUSS ORGANISE CLUBS WITH ACTIVITES FOR ALL AGES
If you receive a grant, briefly tell us what difference it will make to your organisation/area:	DO MEALS FOR MONDAY CLUB AT LUNCH TIMES MANE SELATED KEEP FIT. BINGO. AFTER SCHOOL CLUB. BREAKFAST CLUB AND CRAFTS.

# Project cost

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Please complete table 3.

Table 3 Project cost

Total cost of project:	É200/£300
Amount requested from Macclesfield Town Council:	E200
Amount of any confirmed match funding (this is preferred but not essential)	
Outstanding balance:	
If there is a balance outstanding, please tell us how the shortfall will be met:	
Please state organisations bank account name (who the cheque should be made payable to):	WESTON FRIENDS LLOY DS BANK

# Project beneficiaries Please complete table 4.

### Table 4 Project beneficiaries

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Please tell us how many people you expect to benefit if you were successful with your community grant application:	80/100
Please tell us which geographical area will benefit most from your project or activity:	WESTON ESTATE MACCLES FIELD

### Supporting documentation

Please complete table 5 to indicate if you have the supporting documents. You do not need to send these documents in with your application (apart from your Governing Document and Safeguarding Policies, which must be supplied by email or post within 7 days of submitting this application) but we may request copies at a later date.

Table 5 Supporting documentation

Up to date Annual accounts/income and expenditure		
Copy of your Governing Document (signed)		
Planning permission	N/2	
Relevant insurances		
Safeguarding policies		
Quotes/estimate for equipment		
Affiliation to a Governing Body		
Equalities and Inclusion Policy		

# Data protection and consent

Please ensure that you read this section before submitting your application.

### Grant application administration

Part or all of the information you supply to us will be held on our IT system. This information will be used for the administration of grant applications and for statistical analysis.

Copies of your application, but with personal details redacted, will be provided at the relevant council meeting for consideration of awarding the grant.

For transparency purposes, information about successful grant applications is added to our website and made available to the local press. The press may request contact details of someone able to provide additional information. Please indicate below if you consent to us passing on your name and email address to the local press for this purpose.

Yes / No

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### Grant application support

Please indicate below if you agree for this form to be shared with CVSCE for the purposes of evaluating the application against Macclesfield Town Council's criteria for grants:

Yes / No

Please indicate below if you agree if you agree to CVSCE contacting me by the following methods to provide feedback or offer additional support on completing this application:

Postal address	Yes / Mo Yes / Mo
Email address	
Phone	Yes / No

## Declaration

Please complete table 6.

I certify that to the best of my knowledge all the information contained within this application is correct.

I confirm that I understand, agree and accept the terms and conditions of this grant as set out in the Grants and Funding Policy.

Table 6 Declaration

Signed:	
Date:	
Name:	
Position in group:	CHAIR PERSON

Return to Macclesfield Town Council, Macclesfield Town Hall, Macclesfield SK10 1EA