Grant summary

Organisation

MS Community Action and Support

Funding request

Funding is requested towards a day out for those suffering with Multiple Sclerosis on an adapted canal boat.

Total cost

£360

Funding request

£240

The difference between the total project cost and the funding request will be bridged by matched funding.



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:	MS-CAS Community Action & Support
Address:	
Contact number:	
E-mail address:	

Project details

Please complete table 2.

Table 2 Project details

Organisation:	MS-CAS Community Action & Support
Location of organisation:	Macclesfield & East Cheshire
Project name:	'Mary Sunley' Canal Boat Trips
Short project description:	To offer a day out experience for those suffering with Multiple Sclerosis on an adapted canal boat
If you receive a grant, briefly tell us what difference it will make to your organisation/area:	It will allow up to 24 local sufferers of MS with their physical disabilities to escape from their normality, Our match funding will allow funding for a similar respite day out for their carers or partner

Project cost
Please complete table 3.

Table 3 Project cost

Total cost of project:	£360 plus lunches at additional £150 approx
Amount requested from Macclesfield Town Council:	£240
Amount of any confirmed match funding (this is preferred but not essential)	£120 (canal boat hire) plus lunches on all 3 trips at approx. £150
Outstanding balance:	nil
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):	

Project beneficiariesPlease complete table 4.

Table 4 Project beneficiaries

Please tell us how many people you expect to benefit if you were successful with your community grant application:	36
Please tell us which geographical area will benefit most from your project or activity:	Macclesfield & immediate area

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	yes
Copy of your Governing Document (signed)	yes
Planning permission	n/a
Relevant insurances	yes
Safeguarding policies	yes
Quotes/estimate for equipment	yes
Affiliation to a Governing Body	n/a
Equalities and Inclusion Policy	yes

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 /

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 /

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 No Email address Yes / Phone 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:	15/4/24
Name:	
Position in group:	

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

Finance Committee 20 05 24 Agenda Item 5.3 For further information on how Macclesfield Town Council processes personal data, please view our privacy policy at www.macclesfield-tc.gov.uk or call 01625 374142.