

For office use only

Organisation ID:

Grant ref:

**Hampshire**
County Council**Grants to Voluntary & Community Organisations**
Arts Service: Arts Activity Grant 2009/10

If you require a copy of this form in large print or in an alternative format or you have any questions, please contact the Grants Administrator on 01962 846966.

Before you begin filling in your application form, please read the GUIDANCE NOTES that accompany this application form carefully.

Contact details for your organisation**1. Name of your organisation****2. Address of your organisation**

<input type="text"/>	
<input type="text"/>	Postcode:
Website:	Email:

The main contact person for this application

Please make sure that this person knows about your project and is able to talk about it with a grant officer if required.

3. Title First name Surname

<input type="text"/>	<input type="text"/>	<input type="text"/>
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4. Address

<input type="text"/>	
<input type="text"/>	Postcode:
Telephone number:	Mobile:
Fax number:	Email:

5. Position in your organisation

Information about your organisation

6. How would you describe your organisation? Please tick all boxes that apply.

- Registered charity Registration number:
- Company limited by guarantee Voluntary or community organisation
- School/college Arts Organisation
- Other (Please describe)

7. What are the overall aims and objectives of your organisation? These should be derived from your constitution. (Please try to write no more than **50** words.)

Your project

8. Please give a title for your project

Please try to write no more than **8** words.

9. Please write a brief description of your project.

10. How did you identify the need for your project/proposal?

You will find some ideas to help you in the guidance notes for this application form. Please try and write no more than **50** words.

11. How do the aims and objectives of your organisation and the project/proposal described in this application support the priorities of the County Council?

<http://www3.hants.gov.uk/corporate-strategy-home/performance-plan.htm>

12. How will the groups/individuals involved in your activity be targeted and involved?

13. When and Where is your project going to take place?

Venue/s:

Date from:

Date to:

14. How will you measure the success of your project and how will you record this?

Finance for your project

15. How much funding do you require from Hampshire County Council?

£

16. Estimated expenditure for your project

Venue Costs

	£
	£
	£

Artistic Expenditure

	£
	£
	£

Publicity and Marketing

	£
	£

Management and Administration

	£
	£

Health and Safety

	£
	£

Insurance

	£
	£

In Kind

	£
	£

Other

	£
	£

TOTAL EXPENDITURE

£

17. Estimated income for your project

A = Confirmed B = if you are awaiting a result from an application, please write the date that you expect to hear the outcome.

	A	B	
Box Office / Ticket Sales			
	<input type="checkbox"/>	/ /	£
	<input type="checkbox"/>	/ /	£
Donations			
	<input type="checkbox"/>	/ /	£
	<input type="checkbox"/>	/ /	£
Sundry Fundraising			
	<input type="checkbox"/>	/ /	£
	<input type="checkbox"/>	/ /	£
In Kind			
	<input type="checkbox"/>	/ /	£
	<input type="checkbox"/>	/ /	£
Local Authority Grants			
District/Borough Council	<input type="checkbox"/>	/ /	£
Town Council	<input type="checkbox"/>	/ /	£
Parish Council	<input type="checkbox"/>	/ /	£
Other Grants			
Arts Council England	<input type="checkbox"/>	/ /	£
National Lottery	<input type="checkbox"/>	/ /	£
Trusts/ Foundations	<input type="checkbox"/>	/ /	£
Other			
	<input type="checkbox"/>	/ /	£
	<input type="checkbox"/>	/ /	£
TOTAL INCOME			£

18. Finance summary

TOTAL EXPENDITURE	£
TOTAL INCOME	£
SHORTFALL	£

19. What will you do if you do not reach your fundraising target?

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20. Please list sources of funding that you approached and which have not been able to support your activity. Please also briefly explain the reason that was given for this.

Organisation/s approached	Reason/s given

Monitoring supplement

This information is collected in order to monitor our grant programmes for equality of opportunity. The answers you give will not affect your application for a grant from Hampshire County Council.

21. How did you hear about the Hampshire County Council Arts Grant Scheme?

22. Tell us about your organisation:

How many trustees/members of the management committee do you have?	
How many volunteers/staff do you have?	

23. Of the people you have included in the totals above, how many would you describe as:

	Men/Boys	Women/Girls
Young People (under 25)		
Older People (65+)		
People from black & minority ethnic communities		
Disabled people		

24. Please tell us about the people who will benefit from your project (Tick).

- | | |
|----------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Boys/Men | <input type="checkbox"/> Girls/Women |
| <input type="checkbox"/> Young People (under 25) | <input type="checkbox"/> Older People (65+) |
| <input type="checkbox"/> Black & minority ethnic communities | <input type="checkbox"/> Children & Families |
| <input type="checkbox"/> People with physical disability | <input type="checkbox"/> People with mental disability |
| <input type="checkbox"/> People with learning disability | <input type="checkbox"/> Unemployed people |
| <input type="checkbox"/> People on low incomes | <input type="checkbox"/> Lone parents |
| <input type="checkbox"/> Deprived people living in urban areas | <input type="checkbox"/> People in areas of poor housing |
| <input type="checkbox"/> Deprived people living in rural areas | <input type="checkbox"/> Carers |
| <input type="checkbox"/> Whole Community | <input type="checkbox"/> Other voluntary & community organisations |

25. Please tell us the typical age range that will be involved in your project.

0-15 16-30 30-59 60+

26. Please tell us which geographical area will benefit most from your project.

Towns/ Places:

Districts or boroughs:

If you think your project will benefit all of Hampshire, tick here

Supporting documentation

26. Please supply the following documents when you submit your application. If you do not supply these documents, we will not be able to process your application.

(Please tick appropriate boxes)

Audited or Certified Accounts

If the above is unavailable a copy of most recent financial statement of accounts will be accepted.

Reference

This page can be sent directly to the Arts Office by the referee, if this is the case please note it.

One Compact for Hampshire

The One Compact for Hampshire is a jointly agreed framework of principles to guide the working relationship between the Voluntary and Community Sector and the Public Sector.

You do not need to be a member of the Compact to apply for a grant, but you may find Compact information useful to your organisation. If you would like more information about the Compact, please tick here. Alternatively, you can phone 01962 847391.

Data Protection

The information you have supplied in this form will be used to process your grant application and for monitoring and statistical analysis purposes. Some of the information will be held on a database at Hampshire County Council.

We may occasionally wish to share your contact details with other statutory bodies and voluntary and community organisations for use in surveys and consultations. We may also share your contact details with organisations wanting to send you information about matters of interest to the voluntary and community sector. Please tick the box if you agree that we may use your contact details for this purpose.

Declaration

I declare that the information supplied in this application is true and that any grant money received from Hampshire County Council will be used for the purposes described in this form.

Signed

Date

Position in organisation

Please return your completed form to:

Grants Administrator
Arts Office,
Mottisfont Court
High Street
Winchester
SO23 8ZD
Tel: 01962 846966

OR

email your completed electronic form to arts.office@hants.gov.uk

Please mail in the hard copy of your signed Independent Referee sheet - p.9)

Independent Referee

This should be completed by the Independent Referee - See Guidance Notes

1. Details of referee

Name:	
Job Title:	
Organisation:	
Address:	
	Postcode:
Telephone:	Email:

2. What is the name of the organisation for which you are writing this reference?

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3. How do you know this group?

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4. Why are you supporting this event/activity?

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5. Declaration

I confirm that I know the organisation named in question 2 and I support their application for a grant from Hampshire County Council's Arts Service. I am willing to be contacted to discuss this application with a County Council grants officer if required.

Signed

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Date

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Once completed, please either pass back to the applicant or post to

Grants Administrator

Mottisfont Court

High Street

Winchester

SO23 8ZF

Tel: 01962 846966

arts.office@hants.gov.uk