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| **Suffolk County Council Culture Project Fund****Medium Grant £1,501 - £15,000** |
| **DEADLINE 12 NOON 29 NOVEMBER 2024****All applications must be emailed to** **cultureprojectfund@suffolk.gov.uk**Please note that we will be sharing this information with everyone involved in the decision-making process. We encourage applicants to provide a work email address if possible. We understand that some organisations do not have email addresses, and some freelancers do not distinguish between work and personal emails. Personal email addresses will be hidden to prevent the sharing of some data. |
| **How much money are you applying for?** | **£** |
| **Applicant Information** |
| **Application submission date:** |  |
| **Project name:** |  |
| **Organisation name:** |  |
| **Organisation address:** |  |
| **Name of primary contact:** |  |
| **Contact details:** | **Email address:****Telephone number:****Website:** |
| **Eligibility Checks** |
| **Type of Organisation:****Please select 1 – you must be one of these types of organisation to secure a grant.** | [ ]  Arts Organisation[ ]  Museum Organisation[ ]  Freelance Arts Professional – who is registered as self employed[ ]  Freelance Museums Professional – who is registered as self employed |
| **Organisation’s legal structure:****Please select up to 2 boxes****You must be one of these types of organisation to secure a grant** | [ ]  Registered charity[ ]  Charitable Incorporated Organisation (CIO)[ ]  Community Interest Company (CIC)[ ]  Voluntary or community group [ ]  A ‘not for private profit’ organisation limited by guarantee[ ]  Co-operative Society[ ]  Community Benefit Society[ ]  A consortium of organisations (led by an eligible organisation)[ ]  Freelance Arts or Museums Professional – who is registered as self employed |
| **Governing documents** **Please note, we understand that freelancers may not have these documents.**   | Do you have a constitution/governing document/Articles of Association/Terms of Reference/set of rules? Yes/NoDo you have a management committee (i.e. board of trustees/board of directors/committee) with a minimum of two unrelated people? Yes/NoIf your application is successful, you may be asked to provide a copy of your governing documents. |
| **Accounts** | Do you have your most recent end-of-year accounts? Yes/NoDo you have current management accounts, showing income, expenditure and reserves? Yes/NoIf your application is successful, you may be asked to provide a copy of your accounts |
| **Bank account****Please note, we understand that freelancers may not have separate business accounts.** | Do you have a bank account in the organisation’s name which requires at least two signatories for all transactions? Yes/NoAre all signatories unrelated and live at different addresses (evidence of this may be requested before a grant can be approved)? Yes/No |
| **Please tell us if you have any of these organisational policies.****Please note, we understand that freelancers may not have policies.** | [ ]  Data Protection [ ]  Health and Safety [ ]  Safeguarding (if working with children, young people or vulnerable adults)[ ]  Environmental [ ]  EqualitiesAny other policies relevant to this application? If so, list below:If your application is successful, you may be asked to provide a copy of any relevant policies. |
| **Your Organisation – please give us a short description of your organisation.**Please tell us about your values, how long you have been established and what you do | Please answer here – up to 200 words |
| **Your Project** Please select one of these boxes | [ ]  A new project [ ]  The continuation of an established project [ ]  The development of a project  |
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| **Project Details** |
| Summary  | Please give a short description of the project you plan to deliver. Please tell us where it is going to happen, who you will work with and why you are doing it. |
| Please answer here – up to 500 words |
| **Priorities: Suffolk County Council has four priorities, set out in the application pack. Which priorities will your project deliver on?**  | Please tell us which priority/ies your project will deliver on.Please describe how your project will deliver on this priority/iesPlease note Medium Grants must deliver against at least 1 priority  |
|  Please answer here – up 500 words |
| **Engagement: Which people or communities are you trying to engage with?** | Please describe the people you expect to reach, how you will reach them and how they will benefit.Please show how you have identified those people Please tell us if the people or communities you are planning to work with have been involved in the design of the project and how you have done this? |
| Please answer here – up to 750 words |
| **Evaluation: We are keen to support activity and organisations that have an excellent track record and can show what has been achieved in the past.**  | Please tell us about previous projects that you have delivered, that are similar to the project you are applying for. Please tell us how you delivered the project, who you worked with and what was achieved. Please tell us how you plan to evaluate the project you are proposing.  |
| Please answer here – up to 750 words. Please attach testimony from participants in previous projects.  |
| **Equality, Diversity, and Inclusion** | Please tell us how will you ensure your project is inclusive and accessible?  |
| Please answer here – up to 250 words |
| **Budget: What will the project cost?****Please use the template below OR attach an Excel chart** | How much money do you need to carry out your project? Please provide a breakdown of the costs and income, including any earned income, any match funding and any other cash income coming into the project.Please identify any capital costsYou are welcome to include up to 10% of the project delivery costs to cover the everyday running costs of your organisation. If your project has match funding, we will expect to pay no more than 10% of the value of the Suffolk County Council Culture Project Grant being applied for. Please note, the total grant being applied for, including this contribution to day to day running costs, must not go over £15,000. If you do not have any match funding please ensure you complete the box explaining why.  |
| **Total Project Cost:**

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| **Item** | **Cost (£)** | **Please provide any additional information relating to this cost. Please tell us if there are any capital costs** |
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**Total Project Income:**

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| **Source** | **Amount (£)** | **Please provide any additional information relating to this income. Please tell us if this income has been secured or not** |
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| **Match funding** | Suffolk County Council recognises that securing a range of funds to deliver a project can be challenging. Match funding is not essential; it is desired and valued and will inform decision making. As a guide we would like to see at least 5% of the value of Suffolk County Council Culture Project Funding for Medium Grants.  **If you have secured match funding – please tell us:** Who is match funding? How much match funding has been secured?  **If you have identified and applied for match funding – please tell us:** Who you applied to? How much you have applied for? When decisions will be made?  If your application was unsuccessful?  **If you have identified match funding – but have not applied please tell us:** The funder you have identified? How much you plan to apply for? When you plan to apply? When decisions will be made?   **If you have not identified match funding – and do not intend to apply for match funding please tell us:** Why you will not be applying for match funding?  |
| Please answer here – up to 750 words |
| **What are the key project milestones?** | Please identify the key dates for the delivery of the project – including start date, completion date, plus any other significant dates in the delivery of the project such as: recruitment, phases of the project, purchases, evaluation, payments. |
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| **Activity** | **Date** |
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**Declaration:** **I declare that the information presented in this application and attachments is true and correct and that I am an authorised signatory.****Name: Position: Date:****Signature:** |