

**Local Groups Start-Up Grant Scheme**

As a new group we know that you’ll need some funds to help kick start you into action, and this grant scheme is available to help you do just that. Whether you’re hoping to organise a party to celebrate your launch or you’d like to order some eye catching promotional materials to draw members in – we want to help!

So, if you recently affiliated to The National Deaf Children’s Society and you’d like to apply for £400 read the following information ***carefully*** and return a completed application form (by email or post) to the Local Groups team.

**Eligibility**

***To be eligible for the grant local groups must:***

* Be affiliated to The National Deaf Children’s Society
* Have a group bank account
* Agree to adopt the local groups’ child protection policy
* Have appointed a Designated person who has agreed to the terms of conditions of the policy
* Ensure that you have adequate insurance cover for any activities that you are organising

**Terms and conditions**

***This grant can’t be used:***

* To fund an event or activity that has already happened.
* To cover staff salaries
* For capital projects (e.g. repairs to a building, mobile phones etc.)
* To fund residential events where parents/carers are not present (as per Ofsted regulations)

***If your application is successful, please be aware that:***

* You must only use the grant for the project or activity which you have described in your application form
* You will be required to provide us with feedback on the impact of the grant later in the year
* We will not be liable for any damage or problems with equipment bought
* All funds must be spent within 12 months

***If you have any questions at all please contact us on:***

**Email** – localgroups@ndcs.org.uk

**Phone** – 020 7014 5919

**Post** – Local Groups Team, National Deaf Children’s Society, Castle House, 37 – 45 Paul Street, London, EC2A 4LS

**We look forward to receiving your applications!**

**Start-Up Grant Application Form 2019**

**Please complete all sections of this application form and return it (by email or post) to the Local Groups team.**

**Group details**

Group name:

Contact name for this application:

Email address:

Telephone number:

**Bank details**

Bank name: (e.g. HSBC)

Bank account name: (e.g. Bath DCS)

Account number:

Sort code:

**Your application**

**Please tell us what you would like to apply for and how the money will help you launch your new group.**

**Budget**

**Please provide a breakdown of the costs of individual items that you would like funding for.**

|  |  |
| --- | --- |
| **Individual item** | **\*Total** |
|  |  |
|  |  |
|  |  |
| **Total amount of money you are applying for:** |  |

**\*If any cost is more than £250, please enclose a quote with your application (email from the service provider or screen shot of booking is fine)**

**Grant agreement**

* We have read and understood the local groups start-up grant scheme criteria, terms and conditions.
* We can confirm that we have adequate public liability insurance for the event/activity that we are organising.
* We will only use the grant for the event/activity that we described in the above application.
* If successful in this application we will provide feedback on the impact of this grant when asked to do so.

**\*By signing this form you are confirming that at least two committee members have discussed and agreed upon the contents of the application form.**

We confirm that to our best knowledge, the information in this application form is true and correct. If our application is successful, we agree to abide by these terms and conditions.

**Name:**

**Role:**

**Date:**

**Signature:**

**Name:**

**Role:**

**Date:**

**Signature:**

**Application Checklist**

**You may find it useful to follow this checklist before submitting your application form:**

|  |  |
| --- | --- |
| 1. We are affiliated to The National Deaf Children’s Society |  |
| 1. We have opened up a group bank account |  |
| 1. We have adopted the local groups’ child protection policy |  |
| 1. We have appointed a Designated person who has agreed to the terms and conditions of the Child protection policy |  |
| 1. We have insurance cover for the activity that we’re applying for funding for |  |
| 1. The activity or event that we hope to fund hasn’t happened yet |  |
| 1. The grant will not be used to cover staff salaries, fund capital projects or for residentials where parents/carers are not present |  |
| 1. Two committee members have discussed and agreed upon this application form |  |

***You do not need to return this page; this is for your reference only.***