# COMMUNITY RECOVERY SMALL GRANTS FUND- BIRMINGHAM

**December 2024**

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| **About your Organisation** | | | | | | | | | | |
| **What is the name of your Organisation?** | | |  | | | | | | | |
| **Contact Name:** | | |  | | | | | | | |
| **Address (inc. post code):**  **Telephone**  **Mobile Number**  **Email** | | |  | | | | | | | |
| **Project Address if different from above**  **Telephone**  **Mobile Number**  **Email** | | |  | | | | | | | |
| **What is the status of your group / organisation? Please tick all that apply.** | | | **Registered Charity**   |  | | --- | |  |   **Community Group**   |  | | --- | |  |   **Voluntary Group**   |  | | --- | |  |   **Tenants Assoc.**   |  | | --- | |  |   **Other – Please Specify:** | | | | | | | |
| **Charity number or Company register (if applicable)** | | |  | | | | | | | |
| **In which part of Birmingham is your project taking place?** | | |  | | | | | | | |
| **About your project** | | | | | | | | | | |
| **Project Title:** | | |  | | | | | | | |
| **Project Start Date:** | | |  | | | | | | | |
| **Project Finish Date:** | | |  | | | | | | | |
| **The text boxes will expand as you type** | | | | | | | | | | |
| **What do you plan to do with the funding you are seeking?**  *Please include the content of the project. Who is the target audience and how will they be approached?*  *Please consider activities such as:*   * *Projects that build connections between communities, or help address tensions* * *Initiatives that strengthen resilience to mis/disinformation* * *Clean-up and repair within communities* * *Safety and security measures* | |  | | | | | | | | |
| **What are the risks and issues that you are aiming to address?**  *Please consider the need to:*   * *Safeguard individuals or property* * *Prevent suffering or severe inconvenience* * *Reduce risk of disorder* * *Rebuild social trust and promote cohesion between communities* | |  | | | | | | | | |
| **Are you working with any partners or other groups to deliver your project?** | |  | | | | | | | | |
| **Project Outcomes**  *Please consider:*   * *Relevant milestones and timeline for delivery* * *What positive difference will your project make?* * *How many sessions or participants do you expect?* * *How do you intend to evaluate your project?* | |  | | | | | | | | |
| **Briefly explain any previous relevant experience or work that you have completed in this area.**  *We may request additional information if your bid is successful.* | |  | | | | | | | | |
| **Your Project Costs** | | | | | | | | | | |
| **The fund will consider bids up to a maximum of £15,000.** | | | | | | | | | | |
| **Total Project Cost** | | | | | | **£** | | | | |
| **Item / Activity** | | | | | | | **£** | | | |
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| **Total Cost** | | | | | | | **£** | | | |
| **Has your group applied to any other sources to assist funding this project?**  **YES / NO**  **(If yes, please give details below)** | | | | | | | | | | |
| **Organisation** | **Amount £** | | | **Received** | | | | | **Promised** | **Don’t Know** |
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| **Payment Details** | | | | | | | | | | |
| **The payment will be made by BACS which is an electronic transfer directly into your account. Please provide the information below.** | | | | | | | | | | |
| **BACS TRANSFER DETAILS - This is an electronic transfer directly into your account** | | | | | | | | | | |
| **Name of Bank / Building Society:** | | | | |  | | | | | |
| **Address:** | | | | |  | | | | | |
| **Sort Code:** | | | | |  | | | | | |
| **Account Number:** | | | | |  | | | | | |
| **Are you registered with BCC system?**  **(If not, you will need to register using the Supplier Request form if your bid is successful. See Appendix 1)** | | | | | **YES / NO** | | | | | |
| **If YES, please let us know your vendor number:** | | | | | **Vendor No.** | | | | | |
| **SAFEGUARDING** | | | | | | | | | | |
| **Please complete Appendix 2: Safeguarding assessment and include it with your application.** | | | | | | | | | | |
| **Declaration** | | | | | | | | | | |
| I confirm that:   * the information and supporting documents with this application are correct and complete * if the requested grant is approved, the proposed activities will be carried out as described in this application * details of all applications that have been made to secure additional funds for this and related activities have been disclosed * details of all other funding available to this project have been disclosed * the required supporting documents are enclosed with this application * I am authorised to sign and submit this application for grant funding on behalf of the organisation * Birmingham City Council is committed to being open and transparent about decisions which affect Birmingham Citizens. Details of grant payments to voluntary and community sector organisations are published on the Birmingham City Council website. To view published information, please go to [www.birmingham.gov.uk/vcsf](http://www.birmingham.gov.uk/vcsf).   By submitting this application, you are agreeing that your details may be published, should your application be successful. | | | | | | | | | | |
| **Details of the person who completed the application form**  **Name:** | | | | | | | |  | | |
| **Position Held** | | | | | | | |  | | |
| **Signature:** | | | | | | | |  | | |
| **Date:** | | | | | | | |  | | |

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| **What Happens Next?** |

**Please send the completed application to:** [**Cohesion@birmingham.gov.uk**](mailto:Cohesion@birmingham.gov.uk)

**before 4pm on Tuesday 31st December 2024**

**Check that you have answered every question in the application**

**Make sure the application form has been signed**

**Save a copy of your form for future reference**

**Appendix Forms:**

1. **Supplier Request Form (as detailed in Banking Section)**
2. **Safeguarding**