

Funding Application Form (up to £10k)

Completed form to be emailed to the Beam Park Community Development Lead at beamparkfund@lqgroup.org.uk

Outcomes we want to achieve at Beam Park



- I. Community Investment To build a strong community, promote social inclusion, equality and cooperation on projects and events that enables people living at Beam Park to create a sense of togetherness and belonging to their neighbourhood. Projects, activities or equipment that help promote better relationships between communities living or around Beam Park
- Community Infrastructure projects or services that help develop and build capacity of community groups and individuals within the community to run community activities or tackle social isolation
- **3.** Employment Prospects projects/services to help improve resident's employment prospects
- 4. Social Value Measuring social impact within projects focussing on the needs of Beam Park development. Striving to communicate the positive impact projects are having for people and communities, proving there is value to the community and society.

Target Beneficiaries

All projects must benefit Beam Park residents and the neighbouring communities. As the scheme develops, at least 51% of beneficiaries should be residents of Beam Park.





Summary of application

Name of organisation	
Type of organisation	
Name of project	
Project lead	
Start/end date of project	
Amount of funds requested (£)	
Total cost of project (£)	

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Beam Park Partnership Funding Application Form

(up to £10k)

Completed form to be emailed to the Beam Park Community Development Lead at beamparkfund@lqgroup.org.uk

Project Lead cont	tact name:	2. Date of application:
. Name and addres	ss of your organisation	
Name		
Address		
ostcode		
elephone no		
Mobile No		
Email		
Website Address		

5. What is the	legal st	atus of your or	ganisation?		
Company limite (include Compa		arantee			
Registered Cha (include charity					
Community Int	erest Co	mpany (CIC)			
Social Enterpris (Registered Inco		Organisation)			
Unincorporated	d Organis	ation			
Other (please s	state)				
6. Project Lead	d contact	: details (the pe	erson who v	will manage and implemen	t this project)
Address					
Postcode					
Telephone No					
Mobile No					
Email					
7. Please list a	any other	organisations	you will be	working with to deliver t	his project
Organisation N	ame	Organisation A	Address	Organisation contact details (telephone no. and email)	Nature of relationship with organisation

8. What	is the title of your project?		
9. Wher	will your project start?	10. Wher	will your project end?
II. Tell u	s a short summary of your project: (up t	:o 150 words)	
14. Pleas	e explain your project proposal and how	it relates to	Beam Park, setting out in detail
3 8 71 1 8			
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About your project

addressing an identified need in	and around Beam Park.			
(des ef this president?			
16. Who are the primary beneficia 51% of recipients are to be fron	ries or this project? n Beam Park, tell us how your project will benefit Be.	am Park		
residents and the neighbouring	community. Please explain if this project will be targe	eted to a		
particular group of beneficiaries e.g. children and families, ethnic groups, genders, unemployed				
people etc.				
17. How many people do you estim	nate will be reached by this project?			
Please note – not all projects w	ill have indirect beneficiaries. If possible, tell us how	you aim to		
meet 51% of recipients from Be	am Park residents as well as your overall target.			
Direct Beneficiaries (Participants)	Indirect Beneficiaries	Estimated		
	(Those not taking part but benefitting as a result of improvements made to participants)	Total		
	or improvements made to participants)			

Please identify relevant sources of evidence e.g. consultations with key stakeholders, recent research reports, official statistics or current service demand to demonstrate your project is

15. Please evidence the need for your project: (up to 600 words)

18.	Tell us what methods you will use to engage and involve the people you intend to benefit from the project? Explain how you will make your project accessible to all potential beneficiaries including
	51% of Beam Park residents and communities living in surrounding areas.
M	onitoring and Evaluation – what impact will you have?
19.	What are the Aims and Objectives of your project? The aims of your project are the intended changes that your project will make and indicates the project's purpose. Your project can have more than one aim. The objectives of your project are the practical steps or activities needed to achieve your project aims. Each of your project aims must have clear links to your project objectives
Air	ms
Ob	pjectives

20. Tell us about your plans for measuring impact from the Aims and Objectives. Outlining your principal activities, the outcomes they will achieve and what indicators you will use to measure the success of the project:

(some examples are given below in light grey font to help you structure your response correctly, insert more rows if necessary)

	Proposed activity	Key monitoring data	Activity KPI's	Outcomes	KPI's for Outcome
	What will be done	you will collect To evidence your delivery	How will you show you have been successful?	What changes are experienced by your participants as a result of your activity	Potential measurable data and information you will use to evidence changes have occurred
1.	EXAMPLE: Provision of I0 home work club sessions for disadvantaged families	Attendance records Data on whether children are in receipt of free school meals Postcode data	75% attendance rate for all children at homework clubs 100% of participants are in receipt of FSM	Outcome I Improved academic achievement Improved confidence of children	50% of Children get 5 point increase on academic tests 75% of Children report increased confidence at end of course.
2.	EXAMPLE: Providing sports focused holiday activities for under 5's	Registration forms Attendance records Delivery records	Number and type of holiday activities delivered Number of children regularly attending holiday activities	Outcome 2 Improved physical health of children	90% Children report feeling more confident to make healthy choices following sessions
3.					
4.					
5.					

ZI. Please outline your	project plan (give time-frame with monthly milestones for project delivery)
Date (mm/yyyy)	Milestone
22. Explain how will you List any monitoring m	nechanisms you have in place e.g. surveying methodology, interviews,
video case studies an	nd tell us who will do it. Please also explain how you will manage any data tions e.g. collecting and sharing data with partners and funders
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Project costs

23. What is the total cost of	of your project?	
24. How much funding are	you requesting from the Beam Par	k Partnership?
25. Do you have any match	funding?	
	Funding source	Amount (£)
Secured Match Funding		

	Funding source	Amount (£)
Secured Match Funding		
Unsecured Match Funding (Please specify a date if a funding decision is outstanding)		

Total:			

26. Please provide a breakdown of your project costs (Include requested Beam Park Partnership funding and all match funding sources in your calculations)			
Income List a detailed breakdown of all money coming in including match funding sources	Income (£)		
Income total:			
Expenditure List all expenditure, provide a breakdown of costs and rates of pay, especially where a lump sum amount has been provided e.g. staff hourly rate, venue hire	Expenditure (£)		
Staff costs Please provide cost breakdown			
Participant costs Please provide cost breakdown			
Volunteer costs Please provide cost breakdown			

Operational / Activity costs Please provide cost breakdown	
Office, Overheads, Premises costs Please provide cost breakdown	
Publicity costs Please provide cost breakdown	
Other (please specify)	
Other (please specify)	
Other (please specify)	
Expenditure total:	

28.	Once the funding	has run out,	how do you envi	sage continuation	of this project?	

Due Diligence

29. Please outline your intended project risk assessment: (insert more rows if necessary) Risk Likelihood/Low/ Medium/High Impact Low/ Medium/High to mitigate risk Actions taken to mitigate risk

30. Financial statement summary

Provide a summary of your organisations audited or independently examined accounts over the last 2 years (if available). If your organisation has been operating for less than 2 years, please provide a financial projection.

Financial year	Total Annual Income	Total Annual Expenditure	Total Surplus or Deficit at year end	Total savings or free reserves at year end

Beam Park LLP to provide a supporting reference for your project.				
Reference I		Reference I		
Name:		Name:		
Address:		Address:		
Postcode:		Postcode:		
Telephone No:		Telephone No:		
Mobile No:		Mobile No:		
Email:		Email:		
Relationship with your organisation:		Relationship with your organisation:		
Use checklis	ing documents must be enclose at to provide all supporting docume documents must be signed and def	entation before se		
	ments for organisation n, Memorandum, Articles of Assoc	iation, Trust Deed	l)	
Details of three unrelated organisational Board members				
Bank Details and the name of two unrelated signatories (confirmed on headed paper by organisation)				
Latest audited Annual Accounts and Bank Statement (most recent 2 years of accounts to be provided as a minimum)				
Employers liability insurance				
Public liability insurance				
Equal Opportunities Statement/policy				
Health and Safety Policy				
Safeguarding Children's Policy				
Safeguarding Ac	dults Policy			
DBS reference numbers (for those in the project team working in direct contact with vulnerable people)				

31. References

Declaration

By signing this application, you agree to the following statement:

- You (the main contact named in this application form) are authorised to apply for this grant on behalf of your organisation.
- You understand that if you make any seriously misleading statements (whether deliberate or accidental) at any stage during the application process, or knowingly withhold any information, this could make your application invalid and you could be liable to repay any funds to The Beam Park Partnership.
- Should this application be successful, the contents of this form will inform the Grant Agreement between your organisation and The Beam Park Partnership.

Signed		Date
Name: (in Capital letters)		Position held in Group/Organisation
Counter signatory by organisation Director/CEO	or the	e Chair of Board of Trustees
Signed		Date
Name: (in Capital letters)		Position held in Group/Organisation

Please return this application form in electronic copy (with signatures).





