

**ROYAL DOCKS TRUST/
LONDON BOROUGH OF NEWHAM
Main Programme Funding 2010/11**

**Office Use Only
Ref No:**

SECTION A: About your project

1. Project Details

Name of your organisation

Name of Project (if different)

Address

Telephone Number

Fax Number

Website Address

Contact Person

Position in Organisation

Address (if different from the above)

Direct telephone/mobile number

E-Mail Address

2. (a) Which RDT priority area of service are you applying to provide? (please tick)

Regeneration Older People	Children & Young People Disabled People
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(b) To which Newham Council priority objectives will you be contributing? (please tick)

Cleaner, Greener Newham Working Newham Healthy Newham	Young People's Newham Active & Connected Newham Safer Newham
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(c) How much funding are you applying for?

£

3. Project Details:

Please refer to the guidelines before answering these questions.

(a) What are the objectives of the project? How do you know it is needed?

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(b) How does your project meet the priorities for the programme?

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(c) What are the specific services/activities (outputs) this project will deliver in 2010/2011?

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(d) What outcomes (measurable impact) will this service achieve in 2010/2011?

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(e) How many people will benefit from this service?

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(f) How many Royal Docks Trust area residents will benefit from the service?

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Sub Total		

Total Expenditure £	A	B
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5. Project income

Please give details of all **other** sources of income that will be used for this project. Include details of other funding that you are applying for and say whether this has been secured

Source	Amount	Funding secured? If no, when are you likely to find out?

SECTION C – Monitoring, Quality & Equalities

The funders are actively opposed to racism, sexism, discrimination against disabled people, discrimination against lesbians and gay men and all other forms of discrimination. In line with this, it is expected that all organisations we fund will have an equal opportunities policy, which is being implemented.

6. (a) What recording systems will you use to monitor the outputs and outcomes?

(b) What quality systems or quality measures will you use?

7. How will you involve users in planning or improving your services?

8. (a) How will you address issues of diversity, and ensure equal access, in your service?

(b) How many people are on your management committee?

How many are:

Women

Disabled people

Lesbian and gay men

Service users

Ethnic Breakdown:

African

Asian

British/Irish/Other EU

Caribbean

Mixed

Other (please specify below)

SECTION D - About your organisation

9. Profile of your organisation

When was your organisation set up?

Please give the date of your last Annual General Meeting (or your Inaugural meeting if an AGM has not yet been held)

10. Which of these best describes your organisation?

A company limited by guarantee?
What is the registration number?

A registered charity?
What is the registration number?

An unregistered voluntary organisation?

Affiliated to a regional or national organisation

Other - what type of organisation is it?

11. Is the service for which you are applying currently funded or part-funded, and if so please state the source of funding and the amount you are receiving in the current year (2009/10)

Completing the application form

DECLARATION:

This form must be authorised by the Chair of your Management Committee.

The information set out above is to the best of my knowledge correct. I confirm that if the project receives funding, the organisation will only use it for the purposes specified. I also confirm that the organisation will comply with the Conditions of Grant Aid.

Signature:

Name:

Position

Date

Please complete the checklist on the next page and enclose or attach a copy of the necessary documents when you submit your application. You may submit your application electronically but you must ensure it reaches us by the published deadline.

If you are e-mailing your application and you are successful in receiving funding, your Chairperson will be required to sign a copy of this document as well as an Agreement Form accepting the Conditions of Grant Aid.

Checklist

Have you....

Completed every question?

Kept a copy?

Double-checked your figures?

And have you submitted a copy of:

Your organisation's constitution or other rules (if not already submitted)

Your latest Annual Report and Annual Accounts

Your organisation's equal opportunities policy?

Your current list of Management Committee/ Board Members (Names and addresses)

NOTE: Please submit these documents electronically rather than in hard copy if you are able to do so. If any of the above documents are not submitted or attached please do NOT delay returning this form but give brief details of why they are not attached.

Return to:

Newham Council Leisure Services
PO Box 65916
LONDON
E6 9EY

or e-mail to stephen.collins@newham.gov.uk

Before 5pm Monday 25 January 2010