

1 NOV 2021

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### COMMUNITY GRANTS FUND APPLICATION

Please answer all questions which are relevant to your organisation – failure to do so may result in a delay in the determination of your application

<b>PROJECT</b> (In no more than 25 words)	Shrewsbury & Oswestry Crucial Crew 2022	<b>GRANT AMOUNT REQUESTED</b>	£ 1000
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#### Contact Details

Q1 Name of organisation making application: ..Shrewsbury & Oswestry Crucial Crew.....

Name of contact for this application

Title : ..Mr.. First Name: ..Geoffrey Alan.....Surname: ..Proffitt.....

Position held in the organisation: ..Deputy Chairman / Trustee / Fundraiser.....

Contact Address, including full postcode:

.....  
.....  
.....

.....Postcode: .....

Contact Telephone Number: .....

Email address: .....

**About your organisation**

**Q2 What type of organisation are you?**

Tick (✓) relevant category:

Registered Charity:  Charity Registration Number .....1125144  
Voluntary Organisation:   
Company Limited by Guarantee:  Company Number .....  
Other – Please specify: .....

**Q3 When was your organisation established?**

1994

**Q4 Briefly describe your organisation.**

Describe your organisation, including how many members/users you have, whether there is a subscription fee and the usual activities/services you provide.  
If you are a new organisation, describe the services/activities you plan to provide.

The overall purpose is to provide young people living in the Shrewsbury and Oswestry area of Shropshire with essential life skills, safety & social awareness training in order to help them advance in life by developing their skills, capacities and capabilities to enable them to participate in society as independent, mature and responsible individuals. This is achieved by an unpaid mgt committee of 9 supported by over 100 unpaid volunteers.

**Q5 If you are a subsidiary of a larger organisation, please state which one.**

Crucial Crew is a locally run national concept, but there is no parent body

**Q6 Does your organisation have an agreed Constitution or Memorandum of Association?**

Please state which and attach a copy:

Yes, but see also The Charity Commission website

**Q7 What is your primary source of funding?**

An unpaid fundraiser on the mgt team raises 66% of the running costs whilst the remaining 34% is provided by The Police & Crime Commissioner

Details of the project or activity you are planning

Q8 Describe the projects/activity you plan to use this grant for.

i. Try to be specific about what you will do and how you will do it.

We will run a ten-day safety education event<sup>\*</sup> for 1500 eleven-year -old year 6 children from up to 50 local primary schools. Planning meetings with our professional partners (police, fire, coastguard etc) will determine the content of 13 safety scenarios each day.

\* From 6 - 17 June 2022.

ii. Please state how you have identified this need and how the project will benefit the people of Shrewsbury, together with the estimated time span. If you are seeking continuation funding for this project, please provide evidence for this continued need.

The concept was agreed by senior police officers meeting at Hereford in 1994 and run thereafter in Shropshire by West Mercia Police. It identified vulnerable and impressionable children moving from

Primary to Secondary school without any preparation, Continuous feedback, improvement, scrutiny and demand over 28 years has more than fully justified the need.

iii. How many people from the Parish of Shrewsbury do you expect to benefit from your project or activity?

1000 children  
90 volunteers

Q9 What criteria will be used to measure the success of the project and how many people from the Parish of Shrewsbury do you expect to benefit from it?

Years of feedback from, professional partners, volunteers, teachers, schools and their children. Also Director of Public Health, Shropshire Education Dept Local MP, Shrewsbury Mayors, the PCC and other specialists have scrutinised, commended and endorsed the need for Crucial Crew.

1000 Children from all Shrewsbury Primary Schools, their families, their communities within the parish. 90 of our 100+ volunteers mainly retired people who live in the town.

## Health & Safety

### Q10 What, if any, special safety issues are related to your project/activity?

Please provide the following information –

- i. What kind of insurance does your organisation have?

Public liability and trustee insurance

.....

.....

.....

- ii. Do the leaders have the relevant qualifications and/or experience?

It is our professional partners, the police, fire, coastguard etc who deliver

.....

their up to date safety information facilitated by the Crucial Crew

.....

Management Committee. There is no more cost effective way for

.....

them to deliver their specialist safety education.

- iii. What policies does your organisation have in place (i.e. Health and Safety, Child Protection/Safeguarding, Working with vulnerable adults, Equal Opportunities, CRB Checks etc.)? *You may be required to submit copies of your policies*

Child protection policy, Code of behaviour, Constitution

.....

Charity Commission guidance.

.....

The event is run in a secure environment at Nesscliffe Army Camp

.....

All members of the Mgt Team are first aid trained.

.....

.....

## Funding of your project

### Q11 Previous Applications

If you have applied for and received funding from Shrewsbury Town Council in the past please provide details of the amount, the year and briefly what the funding was used for.

Year	Project Description	Award £
2019	Crucial Crew 2019	1000
2018	Crucial Crew 2018	250
2012	Crucial Crew 2012	500
2008	Crucial Crew 2008	1000
2007	Crucial Crew 2007	5000

**Q12 Project Funding**

Please provide details of the amount of funding you need for your project and give us a breakdown of what the money is for (please enclose any relevant estimates or details).

Tell us the amount of grant requested £...1,000.00... and provide a detailed breakdown as to how you have reached this figure

Project Expenditure Please list all items of expenditure for your project	Amount of Project
Catering	£ 3750
Children's Transport	£ 3500
t-shirts	£ 3750
workbooks	£ 2750
Operational / admin / insurance / Shifty's drug input	£ 4750
<b>Total</b>	<b>£ 18,500</b>
<b>Project Income</b> Please list how the project shall be funded	
Police and Crime Commissioner	£ 7500
Fundraising	£ 10,000
	£
	£
	£
<b>What is the difference?</b> This should be the same as the amount of Grant you are applying for	<b>£ 1,000</b>

**Q13 Covering a Shortfall**

If the Town Council makes an offer less than the amount requested, how will that impact on the Project and how will you cover the shortfall?

The charity has sufficient reserves to guarantee the next event as  
 .....  
 schools and our professional partners need to plan well in advance  
 .....  
 for their activities.  
 .....

.....  
.....  
**Q14 Sustainability**

What plans do you have in place to ensure that your organisation becomes more sustainable and less reliant on grant funding, particularly from the Town Council?

The charity has a full time unpaid fundraiser working to attract funding from numerous and varied sources so that it is not dependent on the same contributors every year. The Town Council is not approached every year.

**Your Accounts**

**Q15** Please provide the following details from your most recent annual accounts (2019)

Total Income (pre Covid)	£ 20,794.00
Less Total Expenditure	£ 20,166.49
Surplus / Loss	£ 627.51
Savings (Reserves, Cash, Investments)	£ 71,330.33

*Please provide a copy of your most recent annual audited accounts or, in the case of newly established organisations, the projected income and expenditure for the next twelve months.*

**You need to include these documents with this application.**

**Account Details**

**Q16** Please provide your bank or building society account details

You can only apply for grant if you have a bank/building society account in the name of your organisation. We will only pay grants into an account which requires at least two people to sign each cheque or withdrawal. These people should not be related.

Account name: .....

Sort Code:

Account Number: .....

Bank/building society name: .....

Bank/building society address.. .....

.....

.....

.....

Who are the signatories and what position do they hold in your organisation?

- |   |            |                           |
|---|------------|---------------------------|
| 1 | Name ..... | Position <b>Chairman</b>  |
| 2 | Name ..... | Position <b>Treasurer</b> |
| 3 | Name ..... | Position .....            |

**Any Other Information**

**Q17 Any other information which you consider to be relevant to your application.**

Crucial Crew has been operating for 28 years during which time  
.....  
one live event was cancelled due to an Foot & Mouth in 2000  
.....

In 2020 and 2021 contingency plans delivered 3000 safety workbooks  
.....  
to year six children at up to 50 schools in lieu of the event at Nesscliffe.  
.....

With your support we are committed to getting Shrewsbury & Oswestry  
.....

Crucial Crew up and running again in June 2022.  
.....

**Declarations**

**Q18 Declaration**

Please give details of a senior member of your organisation.

For example, this may be your Chairperson, Treasurer or Secretary. They must read the application and sign below. **(This must not be the main contact name in Q1).**

I confirm, on behalf of **Shrewsbury & Oswestry Crucial Crew** (insert name of organisation):

*That I am authorised to sign this declaration on its behalf, and that, to the best of my knowledge and belief, all replies are true and accurate.*

*I confirm that I have read the Terms and Conditions set out in the Notes which accompanied this application and further confirm that this application is made on the*

*basis that if successful, the organisation will be bound to use the grant only for the purpose specified in this application, and will have to comply with those Terms and Conditions and any others which the Council might attach to the Grant.*

Post held in organisation: ....Chairman.....

Title .. First Name: ..... Surname: .....

Organisation address:

.....  
.....

..... Postcode: .....

Telephone: .....

Signed: ..... Date: ....November 2021

**Q19 Signature of Person Completing the Application**

This must be the signature of the person named in Q1 as the main contact and **not be the same person who has signed in Q18**

*I confirm that, to the best of my knowledge and belief, all the information in this application from is true and correct. I understand that you may ask for additional information at any stage of the application process.*

Signed: ..... Date: ....29 October 2021.



## Checklist

1. Have you answered every question?
2. Have all signatures been completed?
3. Have you included a copy of your constitution?
4. Have you included a copy of your most recent audited accounts?
5. Please state any supporting documents you are submitting:



1. CONSTITUTION
2. SAFEGUARDING POLICY (CHILDREN)

Please return your completed application form to:

Town Clerk  
Shrewsbury Town Council  
Riggs Hall  
The Library  
Castle Gates  
Shrewsbury  
SY1 2AS

Telephone: 01743 281010

Fax: 01743 281051

Email: [Helen.ball@shrewsburytowncouncil.gov.uk](mailto:Helen.ball@shrewsburytowncouncil.gov.uk)