



SHREWSBURY TOWN COUNCIL 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

PROJECT (In no more than 25 words)	Bursary Fund to subsidise the cost of counselling for local individuals, couples or families who are unable to access our service due to financial hardship	GRANT AMOUNT REQUESTED	£3,000
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Contact Details

Q1 Name of organisation making application:

Crane Quality Counselling.....

Name of contact for this application

Title : Mrs First Name: Lin Surname: Foley.....

Position held in the organisation:

Chief Executive.....

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 1175610.....
Voluntary Organisation: ()
Company Limited by Guarantee: () Company Number
Other – Please specify:

Q3 When was your organisation established?

November 2017.....

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.

Crane Quality Counselling was established in January 2017 and registered as a Charitable Incorporated Organisation in November 2017. Our aim is to educate the public concerning the benefits of secure couple relationships, marriage and family life in order to improve the emotional, sexual and spiritual well-being of individuals which is derived from committed relationships. We have been awarded a £3,000 Grant by The Shropshire Welfare Trust to set up a Bursary Fund so that those in need of counselling are able to access the service when they cannot afford to meet the full cost themselves. We would like to apply for matched funding from Shrewsbury Town Council's Community Grants Fund 2018.....

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

.....

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

Please state which and attach a copy:

Constitution.....

Q7 What is your primary source of funding?

Fund raising events and activities. Contract work in schools, and prisons. We are also opening a shop in Shrewsbury which will contribute to our work and offset counselling costs for those unable to meet the current counselling cost of £45 per hour.....

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.

Partnership work with the Shropshire Primary Care Trust and GP Practices to identify those who would benefit from counselling to improve the general well-being of individuals and families in Shrewsbury and its environs.....

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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 charity's staff and volunteers have many years' experience working across Shropshire with vulnerable client groups and know the level of need to help the current gap in provision.....

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

20

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?

We will constantly examine the success of the counselling service through monthly compilation of statistics, detailed regular discussions with contractors and partner organisations. We will also monitor carefully business development and growth.....

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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? Commercial Combined Policy.....

Public Liability Cover £10,000,000

Professional Liability Cover £1,000,000

Management Liability Cover £250,000

Employer's Liability Cover £10,000,000.....

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

Our Counsellors are fully trained and accredited with the British Association for Counselling and Psychotherapy

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*

Our policies include Child Protection & Safeguarding, Code of Conduct,
Confidentiality, Health & Safety, Disclosure & Barring Service. Environmental, Lone
Working, Personal Information, Risk Assessment, Safeguarding Adults at
Risk.....
.....
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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 £

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 £3,000..... 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
Client Assessment Sessions normally charged at £45 per appointment. Bursary Fund will be drawn down to subsidise the cost by £20. This will enable 20 Shrewsbury families to be helped.	£3,000
	£
	£
	£
	£
Total	£

Project Income Please list how the project shall be funded	
	£
	£
	£
	£
	£
What is the difference? This should be the same as the amount of Grant you are applying for	£3,000

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 number of bursaries offered will be reduced

accordingly.....

.....

.....

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

We are also requesting funds from Trusts and Foundations and undertake regular fund

raising activities. We have a number of clients who will be able to fund their own

appointments without the need for bursary assistance

Your Accounts

Q15 Please provide the following details from your most recent annual accounts

Total Income	£7,087
Less Total Expenditure	£5,575
Surplus / Loss	£1,512
Savings (Reserves, Cash, Investments)	£8,057

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 give us 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:

Bank/building society name:

Bank/building society address:

.....

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

1	Name	Position
2	Name	Position
3	Name	Position

Any Other Information

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

We recognise that we are a new charity but we are now developing our marketing capabilities and feel that we might soon be inundated with clients requiring our counselling services. The establishment of a Bursary Fund will help to ensure that we are able to offer subsidised counselling for those unable to meet the full cost.....

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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 Crane Quality Counselling....(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:

Title ; First Name: !

Surname:

Organisation address:

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

Telephone:

Signed: Date:

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 form is true and correct. I understand that you may ask for additional information at any stage of the application process.

Signed:

Date:

Checklist

- | | |
|---|--------------------------|
| 1. Have you answered every question? | <input type="checkbox"/> |
| 2. Have all signatures been completed? | <input type="checkbox"/> |
| 3. Have you included a copy of your constitution? | <input type="checkbox"/> |
| 4. Have you included a copy of your most recent audited accounts? | <input type="checkbox"/> |
| 5. Please state any supporting documents you are submitting: | <input type="checkbox"/> |

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