



Community Grants Application Form 

September 2024

**Before submitting this Application Form please make sure you have:**

* Read the Community Grants Guidance to ensure your application is eligible
* Completed all relevant fields including budget information
* Attached all required documents

Once you have completed the application form please email your submission to fife.healthcharitycommunitygrants@nhs.scot before 9am on Monday 4 November 2024. Your application will be reviewed by the charity team and the outcome communicated to you via email.

## **Section 1: About you and your charity**

|  |  |
| --- | --- |
| 1. **Organisation Name**
 |  |
| 1. **Charity Number**
 |  |
| 1. **Charity Address**
 |  |
| 1. **Applicant Name**
 |  |
| 1. **Job Title**
 |  |
| 1. **Email Address**
 |  |
| 1. **Phone Number**
 |  |
| 1. **Charity website**
 |  |
| 1. **Please tick to confirm your charity has each of these in place**
 | [ ] **Annual Audited or Independently Examined Accounts** [ ] **Safeguarding Policy** [ ] **Health and Safety Policy**[ ] **Proof of Insurance including Public Liability** [ ] **Proof of employer’s liability insurance and employer’s registration number (if applicable)** |

## **Section 2: Tell us what you want the funding for and why**

|  |  |
| --- | --- |
| **1. Are you applying for a new or existing project/activity work?** | [ ] **New** [ ] **Existing**  |
| If existing, how was this funded to date?  |  |
| **3. Name of project/activity** |  |
| **4. Length of delivery** (max 12 months) |  |
| **5. Description***Please include any plan of delivery, activities you want to carry out as part of the proposed work and timeline of delivery.* | (Approximately 500 words) |
| **6. How does this work meet Fife Health Charity’s grant criteria?**  | (Approximately 300 words) |
| **7. Does your organisation work with young people?**  | [ ] **Yes**[ ] **No**[ ] **Sometimes** |
| **8. Who will benefit?** (Can tick multiple) | [ ] **Children (0-4)**[ ] **Children (5-15**[ ] **Young People (16-25)**[ ] **Families** [ ] **Other (Detail below)** |
| **If other, please detail beneficiary group:** |  |
| **9. How many people will benefit/participate?** (Number can be an estimate) |  |
| **10. What geographical area will the work cover?** **(**Please select all that apply) | [ ] **Cowdenbeath** [ ] **City of Dunfermline**[ ] **Glenrothes**[ ] **Kirkcaldy**[ ] **Levenmouth**[ ] **North East Fife**[ ] **South and West Fife** [ ] **Fife wide** |

## **Section 3: The difference you want to make**

|  |  |
| --- | --- |
| **1. Does your application meet two or more of the following Fife Health Charity outcomes?** (Please tick) | [ ] **Increasing support for children and young people**[ ] **Improving people’s mental wellbeing** [ ] **Reducing health inequalities by supporting approaches focused on early intervention and prevention** |
| **2. What difference will your project/activity make?** *Please include at least one outcome and three outputs you would expect to see.*  |
| * **Outcomes**
 | * **Outputs**
 |
|  |  |
| **3. How will you know you are making a difference?** *How will you monitor the project?* |  |

## **Section 4: Financial Information**

|  |  |
| --- | --- |
| **1. How much would you like to apply for?** (Max £5,000) |  |
| **2. Itemised Budget** |
| **Item** (Delivery Costs) | **Quantity**  | **Total** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Item** (Overhead Costs) | **Quantity**  | **Total** |
|  |  |  |
|  |  |  |
| **TOTAL:** |  |
| 3. Is the work being match funded?  | [ ] **Yes** [ ] **No** |
| If so, by how much and by what organisation? |  |
| 4. Does your project/activity require match funding?  | [ ] **Yes** [ ] **No** |

##  **Section 5: Signature and Declaration**

To the best of my knowledge, the information provided on this application gives a true and accurate account of my organisation’s work. I confirm that:

* I am authorised to commit my organisation in this way
* I am authorised to sign that we will comply with the terms and conditions of this grant as detailed below
* My organisation unconditionally authorises Fife Health Charity to use any details obtained about my organisation through this application or project report to fulfil Fife Health Charity’s obligations to evaluate its grant-making; and/or to use in promoting the impact of our grant-making through press or publications without the need to obtain any further consent or agreement from me or my organisation.
* I understand that as part of the assessment of this application, Fife Health Charity may share and seek information from other funders, where relevant and including to determine if match-funding is in place.
* This application (if approved) will enable our charity’s work to continue supporting children and young people by improving their mental wellbeing

I understand that Fife Health Charity abides by the Data Protection and Privacy Policies of NHS Fife and will collect, use and manage data in accordance with these policies. In this instance, Fife Health Charity will only use the data provided through this application for the purpose of assessing the application; managing any subsequent grant that may be awarded; and communicating any future grant programmes to our charity.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |

#### For Fife Health Charity Use Only:

|  |  |
| --- | --- |
| **Reviewed by:** |  |
| **Outcome:** | [ ] Eligible | [ ] Needs More Information | [ ] Not Eligible |
| **Date:** |  |

# Terms and conditions

This grant is provided by Fife Health Charity as part of our Community Grants Programme approved by the charity trustees and is subject to the following terms and conditions.

#### 1. Grant.

1.1 Fife Health Charity have agreed to make a grant (the 'Grant') in accordance with your application as approved by Fife Health Charity.

1.2 Fife Health Charity accepts no responsibility, financial or otherwise, for the expenditure of the Grant or liabilities arising out of such expenditure and Fife Health Charity shall have no further liability to you. Any liabilities outstanding or arising in connection with the use of the Grant shall be your financial responsibility.

1.3 Where the Grant will be used to fund staffing costs no employment relationship shall arise between Fife Health Charity and any staff funded by the Grant. Fife Health Charity will not provide permanent funding of posts and you, as the employer, will become responsible for all costs relating to any funded posts or employee/s after the period funded by the Grant and will be responsible throughout for all other employment issues associated with the role.

1.4 These terms and conditions shall remain in force in relation to the Grant until the full amount of the Grant has been expended and all reporting obligations in relation to the Grant have been complied with.

#### 2. Purpose and use of Grant

2.1 The Grant can only be spent on the purposes for which it was awarded, based on the application received and approved by Fife Health Charity. The Grant is held by you on trust for these purposes. As such the Grant should be recorded as ‘restricted’ funding within your charity accounts.

2.2 Any change to the proposed use of the grant must be requested and permission confirmed in writing from Fife Health Charity. The Grant must be applied with any grant programme guidance provided to you by Fife Health Charity.

2.3 The Grant must be fully spent within the agreed time period as set out in your Grant Offer Letter. If the total cost of the project is less than the grant awarded, please let Fife Health Charity know as soon as possible. Any unused grant will be required to be returned to Fife Health Charity.

2.4 The Grant is awarded on a non-recurring basis and there should be no expectation of further funding for your project once it has been completed.

2.5 You must adhere to all relevant legislation, policies and procedures in the delivery of the Grant funded project. This includes, but is not restricted to: Health and Safety, Safeguarding, Data Protection, Employment and Charity legislation.

During the grant period you must maintain such insurances as required for the activities you carry out with the Grant and will provide confirmation of insurances to Fife Health Charity if requested.

#### 3. Monitoring, reporting and communication

3.1 The monitoring and evaluation of our grants is important to Fife Health Charity. It is a requirement of your Grant that all reporting requirements, as set out in the Grant Offer Letter, are adhered to. You also agree to support any activities which Fife Health Charity undertakes to promote this project and its impact.

3.2 Proper financial records of all grant income and expenditure must be kept throughout the life of, and for at least 12 months, following completion of the Grant. If requested, copies of receipts or invoices must be made available, along with any other records, to Fife Health Charity.

3.3 The support from Fife Health Charity as a charitable funder must be acknowledged in all promotional materials and activities (both physical and electronic) relating to the work funded. This includes:

* Any official event relating to the funded project – this must also be planned to allow for official representation from the charity if required.
* The use of the charity logo (a copy of our logos can be emailed to you on request).
* Use of appropriate wording in the case of training, events or other such like e.g. “this ‘event’ was made possible with funding from Fife Health Charity” / “supported by Fife Health Charity”.

3.4 You will acknowledge the Grant award via your website and in social media channels and in any printed collateral which refers to the work undertaken with the Grant. Please include the Fife Health CharityX (formerly Twitter) accounts @FifeHealth in X posts (tweets).

3.5 You will work with Fife Health Charity and assist with any reasonable requests in relation to publicity in relation to the Grant.

3.6 You will not use Fife Health Charity’s name, logos and any other imagery in any way which is inappropriate or in any way damaging to either party. If, in the reasonable opinion of Fife Health Charity, your use is inappropriate or in any way damaging, you will cease to use the name, the logo or any other imagery immediately upon receiving written notice (including by email) from Fife Health Charity, delete any online copies, and withdraw all hard copy materials using the name, logo or other imagery.

#### 4 Data protection

4.1 Neither party will process any personal data for or on behalf of the other under these terms and conditions. In the event that any sharing of personal data is necessary, for example in relation to publicity, any sharing will be done in accordance with all applicable data protection laws and you will enter into a separate data agreement with Fife Health Charity if necessary.

#### 5 Withdrawal, repayment or suspension of the grant

5.1 The grant agreement will be withdrawn and any grant made will require to be repaid, in the event of any of the following occurring:

* Failure to comply with any terms and conditions contained in this letter, except where the prior written agreement of Fife Health Charity has been obtained to the waiving of the term and conditions in question
* Any information supplied in connection with the grant application is found to be false or misleading, or it is found that relevant information has been withheld.
* You are otherwise in material or persistent breach of these terms and conditions.
* You are unable to pay your debts as they fall due, are insolvent or placed into receivership, administration or liquidation or a petition is presented for you winding up.

#### 6 General

6.1

In the event that any dispute arises between you and Fife Health Charity in relation to the Grant or these terms and conditions, the matter will be referred to an appropriate senior individual at each organisation who will meet in good faith to resolve the matter. If the senior individuals cannot resolve the dispute it shall be considered by your board and that of Fife Health Charity, with a view to resolving the matter expediently and in good faith, engaging the services of a mediator if all parties consider it would assist.

6.2 These terms and conditions do not give rise to any rights under the Contracts (Rights of Third Parties) Act 1999 to enforce any of these terms.

6.3 You acknowledge and agree that it is not intended or envisaged that the TUPE Regulations (Transfer of Undertakings (Protection of Employment) Regulations 2006 (as amended from time to time)) will apply to any aspect of these terms and conditions or to the Grant whether at the date of the Grant, at any time during the period of the Grant or at the end of the period of the Grant, and shall consult with Fife Health Charity if you consider or are advised that these regulations apply in this respect.

6.4 Nothing in these terms and conditions is intended to, or shall be deemed to, establish any partnership or joint venture between the parties, constitute any party the agent of another party, or authorise any party to make or enter into any commitments for or on behalf of the other party.