**Application for GMCA Community Grants Salford CSP**

**STANDING TOGETHER COMMUNITY GRANTS**

**Name of Organisation:**

**Please outline which LDPG this bid is being made too**

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**Please outline the project that funding is requested for? (Description and timescale)**

*(Bids must be for community and voluntary organisations only and must not be for established services or posts))*

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**Do you carry out DBS (formerly CRB) checks on staff and volunteers? If not please explain why?**

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| **Have you carried out a Salford Safeguarding Self Assessment to ensure that services you deliver are safe for children and young people?** | |  | | | |
| **If you have not carried out a Salford Safeguarding Self Assessment please describe how you know your services are safe?** | | | | | | |
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| **Please provide a breakdown of the financial assistance required including items of expenditure and their estimated costs.** | | | |
| **Item** | | **Cost** | |
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|  | |  | |
|  | |  | |
| **TOTAL** | |  | |
| **Please describe how your application links to at least one of the following Standing Together objectives** | | | |
| **Keeping People Safe** | |  | |
| **Reducing harm and offending** | |  | |
| **Strengthening communities and places** | |  | |
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**PLEASE NOTE: All applicants must provide a copy of their organisations bank statements for the previous 3 months, if working with vulnerable adults or children a copy of their relevant safeguarding policies and if applying for more than £500 a copy of their organisations constitution.**

**CONFIDENTIAL INFORMATION**

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| **Chairpersons name, address, telephone number and email address** |  |
| **Treasurers name, address, telephone number and email address** |  |
| **Secretary’s name, address, telephone number and email address** |  |
| **Main contacts name, address, telephone number and email address** |  |

**Neighbourhood Management Admin - This page must not be circulated**