



Selby Town Council

Grants Policy

Introduction

Selby Town Council (the Council) sets a budget each year for the award of community grants to Voluntary organisations / Community groups (not individuals) that provide a service or activity for the benefit of the residents of Selby Town

1. Applications for grants will be received, each year, up to a deadline of 31 March. The Grant Application Form specifies the information required in support of a grant and the process to be followed
2. An Evaluation Form is required to be completed within six months, this is sent with the notification of a successful application letter
3. The Council will consider the grant applications at a Special Grants meeting in April each year
4. The Council will use the criteria when deciding on the award of grants using the Assessing Grant Applications Form
5. If any of the grant budget is not allocated at the meeting (no. 3 above), further grant applications may be considered at subsequent meetings, but only if there is sufficient justification as to why the application was not submitted by the deadline (e.g., the organisation did not exist at that time, or the need could not have been identified at that time)

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Grant Application Form

Please ensure that when applying for a grant, you use this form and answer every question. If you fail to do so, Selby Town Council reserves the right not to consider your application. You must provide the attachments requested to support your application. You may supply further information *if it is relevant to your application*.

About your organisation

| | |
|---|--|
| Name of organisation | |
| Contact name | |
| Position | |
| Address | |
| Landline | |
| Mobile | |
| Email address | |
| Social media accounts (if you have any) | |

Status of your organisation (please tick) and provide additional information requested

| | | | |
|--|--------------------------|--|--|
| Registered Charity | <input type="checkbox"/> | Registered Number | |
| Charitable Incorporated Organisation (CIO) | <input type="checkbox"/> | Registered Number | |
| Community Interest Company (CIC) | <input type="checkbox"/> | Registered Number | |
| Unincorporated organisation | <input type="checkbox"/> | Please supply copy of constitution with your application | |
| Sports or Social Club | <input type="checkbox"/> | Please supply details of registration with a national body with your application | |
| Other | <input type="checkbox"/> | Please provide full details in the box below | |
| | | | |

What are the aims and objectives of your organisation? (Please write no more than 150 words – you may include your mission statement with your application, if you have one)

| | |
|---|--|
| How many users/members does your organisation have? If you are part of a national or regional organisation, please give the number of users/members in your local branch. | |
|---|--|

| | |
|---|--|
| How many users/members live in Selby Town (please note this excludes Barlby, Brayton, Thorpe Willoughby and other villages) | |
|---|--|

Where are your meetings held?

| |
|--|
| |
|--|

If you have an office/an administrative base, where is it?

| |
|--|
| |
|--|

| | | | |
|---|---|-----|--|
| How much do you charge for membership/use | £ | Per | |
|---|---|-----|--|

Your Funding Application

| | |
|-------------------------------|--|
| Amount of funding applied for | |
|-------------------------------|--|

For what specific purpose(s) do you need this funding? Please include the expected start and end date for the project(s) or service(s). If you are applying for funding for a long-term project or service, please give details of how you plan to fund it in the longer term. (Please write no more than 500 words)

| |
|--|
| |
|--|

Who will be responsible for the delivery of the project(s) and/or service(s) and what relevant qualifications and experience do they have?

| |
|--|
| |
|--|

How would the funds make a difference to your organisation and its users? (Please write no more than 500 words)

| |
|--|
| |
|--|

Describe the types of users the funding would benefit - please refer to characteristics such as age, disability and health conditions, sex, gender reassignment, ethnicity, sexual orientation and socio-economic background, as relevant to your organisation's work. Please use bullet points.

| |
|--|
| |
|--|

If you wish to tell us anything more in support of your bid, please do so below. (Please write no more than 500 words)

| |
|--|
| |
|--|

Your Organisation's Finances

| Finances for the last accounting year | |
|--|--|
| Dates of accounting year | |
| Total income | |
| Total expenditure | |
| Total income minus total expenditure | |
| Total balances/reserves/bank balance at the end of your last accounting year | |

Please give details of your organisations financial reporting procedures. You may include a written policy or procedure with your application if you have one. If you do not have any financial reporting procedures, please explain how your organisation's finances are checked or audited.

| |
|--|
| |
|--|

Please give details of grants you have received from Selby Town Council in the past five years – specify the amount, date and purpose for each grant

| Year | Amount | Purpose |
|------|--------|---------|
| | | |
| | | |
| | | |
| | | |

If you have applied to any other organisations in the past year to help with funding for the same project(s)/service(s), please give details

| Organisation applied to | Date of application | Amount requested | Successful, unsuccessful or pending? |
|-------------------------|---------------------|------------------|--------------------------------------|
| | | | |
| | | | |
| | | | |

Payment details to be used if your application is successful

Please note, our default method of payment is BACS (bank transfer)

| | |
|----------------|--|
| Account name | |
| Sort Code | |
| Account Number | |

If you do need a cheque, please let us know on being notified of your successful application.

Declaration

I declare that the details I have provided are true and correct to the best of my knowledge.

Our organisation agrees to be bound by the terms and conditions set out in Selby Town Council's Grants Policy.

I confirm that, if our application is successful, we will acknowledge the funding provided by Selby Town Council on our website, letter headed paper and any other relevant paperwork.

Name _____ Position _____
Signature _____ Date _____

Checklist

| | |
|--|--|
| All questions on the form completed | |
| Declaration signed | |
| Copies of latest audited/approved accounts and for previous two financial years attached | |
| Any other attachments referred to in the application form are attached | |
| Evidence of acknowledgement of any previous Selby Town Council funding attached | |

This form must be fully completed and returned with all necessary documentation by 12:00 noon on 31 March. Late applications will not be considered.

**Please return to: The Town Clerk, Selby Town Council, Town Hall, York Street, Selby YO8 4AJ
or email to: admin@selbytowncouncil.gov.uk**

Applications will be considered at the Selby Town Council Special Grants meeting each year. The decision of the Council is final and there is no appeals process. No correspondence will be entered into with unsuccessful applicants.

Appendix 1

Terms and Conditions

Selby Town Council (the Council) reserves the right to grant the amount requested, grant any amount up to that requested or to refuse any grant application. The Council may also award a grant subject to meeting additional criteria or the satisfactory answers to supplementary questions.

Failure to answer any of the questions on this form or to supply the information required may result in automatic disqualification from any grants.

By signing this form, you are certifying that all answers are true and correct to the best of your knowledge. If any of your responses are found to be untrue the Council reserves the right to take action to reclaim any grant awarded.

All grant funds awarded must only be used for the specific purposes stated in the 12 months following the award. Grant funds awarded must NOT be used for any other purpose. If your organisation finds it unable to use the funds for the purpose stated, the Council reserves the right to reclaim the grant from you.

However, if your organisation finds that it is having genuine difficulties using the funds for the specific purposes stated, please get in touch with the Council. Where appropriate, we will try to agree alternative uses of the funds with you. Only after such a written agreement from the Council is obtained may you use the funds for the alternative uses. It is in your own interest to discuss this with the Council at the earliest opportunity – otherwise the Council reserves the right to reclaim the money back from you.

Your organisation is responsible for acknowledging the contribution made by the Council as stated in your responses, and for meeting the cost of such acknowledgement.

Your organisation **MUST** complete the evaluation form issued by the Council. This form allows the Council to ensure that the funds awarded have been used for the purposes set out in the application form.

If your organisation fails to comply with these terms and conditions, the Council reserves the right to take action to reclaim the amount awarded and to refuse funding in future years.

We will not provide funding retrospectively.

Appendix 2

Selby Town Council Grant Evaluation Form

Reminder – Failure to return this form **WILL** result in no further grants being awarded to your group/organisation.

Please complete and return this form within 6 months of completion of your project or scheme, returning it to the address below.

Please complete all sections

As a condition of your funding, you agree to provide evidence of how your funding was spent – failure to do this may exclude applicants from applying for any future funding. **Please remember to include receipts, invoices or photographs of the project with this evaluation form.**

Your feedback is important to us as it is used for internal audit purposes in our community planning work and enables us to reflect on our Community Grants process and how well the public funds used have addressed the needs of the community.

If you would prefer to complete an electronic version, this may be downloaded from the Council's website (www.selbytowncouncil.gov.uk)

PLEASE WRITE CLEARLY

Name of Organisation/Group:

What did your project/scheme involve and how was your grant spent? (e.g., funded days out, funded room hire)?

| | | |
|---|---------------------------------|--------------------------------|
| How did/does your project benefit local people and approximately how many? | | |
| | | |
| What other Agencies/Groups/Organisations were involved in this project? | | |
| | | |
| Do you consider your project/scheme has proved a success, and if so, why? | | |
| | | |
| If your project was for a long-term item (e.g., Counselling over several years, or a repeat project (e.g., summer playscheme), how are you intending to sustain this in the future? | | |
| | | |
| How much funding did you receive from Selby Town Council (STC)? | | |
| | | |
| What was the total cost of your project (including that awarded by STC)? | | |
| | | |
| Did you obtain any publicity for this project or scheme and was the award from STC acknowledged in any publications e.g., press articles or newsletters? (Please tick) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| I have enclosed an example of all publicity acknowledging STC's award (Please tick) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Name: Address: | | |
| Tel No/Email: | Date: | |
| Thank you for taking time to complete this evaluation form | | |
| Please return your completed evaluation to: Selby Town Council, The Town Hall, York St, Selby, YO8 4AJ | | |

Appendix 3

Selby Town Council Successful Grant Letter Wording

We are pleased to inform that your Grant application has been successful, and you have been awarded the sum of £ ****

As part of our ongoing review of our policies we are now requesting that Community Grant recipients complete and return an evaluation form of their project or event within six months of its completion. This will allow us to ensure that the funds have been used for the purposes set out in the application form and assess the impact of the project or event on members of our community within Selby Town.

You are required to show how our funds have been spent by way of receipts where appropriate and to produce photographic or other evidence of completion of the project or event. This may be as simple as a receipted invoice, or a photograph of the event or equipment purchased or could be evaluation by users of your service. If you would like further guidance, please contact us.

Our purpose in carrying out the evaluation is to reflect on our Community Grants process and how well the public funds used have addressed the needs of the community.

Failure to complete the evaluation and provide evidence of spend may result in future applications not being considered. The Evaluation Form was attached to the Grant Application Form at Appendix 2. Further copies are available on request.

Selby Town Council holds an annual presentation to successful applicants in the Town Hall which is hosted by the Mayor, or Deputy Mayor in the Mayors absence.

This year it will take place on atpm.

Please acknowledge if you will be able to attend by Tel: 01757 708449 or admin@selbytowncouncil.gov.uk

Appendix 4

Selby Town Council Unsuccessful Grant Letter Wording

Council considered your application at their Special Grants meeting on the *****. Unfortunately, on this occasion your application has been unsuccessful.

Appendix 5

Selby Town Council – Assessing Grant Applications Form

Applicants Name

Project

How would you score this project in terms of?

Quality and Rigor:

Score:

- Are the applicant's credentials satisfactory?
- Is the organisation properly constituted with a proper Trustee Board or Management Board and robust financial reporting procedures in place? Does the board meet regularly?
- Is the organisation a registered charity or CIO?
- Do the qualifications of people leading the activity suggest the project/service will be of high quality?

Community Benefit:

Score:

- Does the project/service serve and involve the community? Does it serve a particular segment of the community? Does it benefit an underserved or deprived population?
- Is the applicant based in Selby Town or does it deliver its services in the Town?
- Does the project/service contribute to the well-being of the community as a whole or support cultural development?
- Does the project/service address a recognised community need?
- How many residents will benefit from the project/service?

Planning:

Score:

- Is there sufficient planning? Does the timeline for delivery make sense to ensure quality in its implementation?
- Have the date, time and venue been set for the project's completion? Are contact names listed for any performances/showings/sessions in the area?

Budget:

Score:

- Can the project/service be successful if partially funded?
- Has the applicant sought or found additional resources?
- Will the project/service be able to take place without the Council's support? Have funds been requested from other sources?

Total: /20

Rating Scale

The organisation, program or project is:

5=Overall excellent in all criteria with no *major* weaknesses or failings in the strict context of that criteria

4=Very good in all criteria or excellent in almost all, with perhaps no more than one major area requiring attention, correction or major improvement

3=Good/average in all criteria, or very good in some areas but weak in others with at least one or more criteria requiring attention

2=Weak in several areas, but not necessarily absent of some merit in some areas

1=Very weak in almost all areas of the criteria

| | |
|----------------------------|---------------|
| Date of Approval | 25.11.24 |
| Latest date of next review | November 2027 |
| Cross Reference Documents | |