

London Borough of Tower Hamlets Health, Adults and Community Services Directorate Ageing Well Small Grants (2019/20) Application Form

Completed forms should be returned by no later than TBC 2019 to:

Jamie Bird – Strategic Commissioning Officer
4th Floor, Mulberry Place Town Hall
5 Clove Crescent
London E14 2BG
jamie.bird@towerhamlets.gov.uk
Tel: 0207 364 2304

We aim to acknowledge receipt of your completed application form. If you have sent a completed form and have not received an acknowledgement within a reasonable timeframe please contact us (before the deadline above). It is recommended that, where possible, you retain a copy of your completed application form for your own records.

Should you have queries related to the completion of this form, please contact Jamie Bird using the details above

Eligibility Criteria

- The organisation/project must be engaged in social activities for the benefit of older people who reside in the London Borough of Tower Hamlets.
- The organisation/project must have its own current account or instruct an organisation (such as a Housing Association or landlord) to manage the handling of the grant on its behalf. Grant payments cannot be made to an individual or to a personal bank account, or to a savings account.
- Grants will not be given to organisations/projects already in receipt of funding from the Council for the purposes for which financial assistance is sought.
- Where an organisation/project delivers services from premises owned by the Council, a formal written lease or rental agreement with the Council must be in place at the time that recommendations are formulated.
- Organisations who received a Small Grant in 2018/19 must have provided satisfactory evidence (e.g. receipts) that the grant was used for the purposes outlined in their application (these would have been acknowledged).
- The organisation/project should satisfy the Council that it operates fair and equal practices in employment, and in the provision of services.
- The organisation must be able to comply with the following monitoring requirements:
 - To submit evidence that the grant has been used for the agreed purposes (e.g. receipts)
 - To provide feedback on how the grant has benefitted the group
 - To collect and provide equality information for beneficiaries

Where appropriate, forms will be provided to enable this information to be collected and returned.

1. Organisation details:

a) Organisation name:

b) Address:

c) Postcode:

d) Does your organisation have a constitution or governing document?:
(please tick one box)

Yes - please enclose a copy with your application

No - briefly describe its main aim in the space below:

e) When was your organisation/project formed or constituted:

f) Legal status (e.g. registered charity, unregistered organisation):

g) Charity/company number (if applicable):

h) How many registered members does your group have?:

i) Is your organisation in receipt of LBTH financial support? (e.g: other grant funding, rent subsidy)

2. Contact Details:

a) **Prefix** (e.g. Mr/Mrs/Miss):

b) **First name:**

c) **Surname**

d) **Job title** (Position within organisation):

e) **Telephone no.:**

f) **email address:**

g) **address** (to be used for correspondence)

3. Project proposal

a) **Project short description:**

Please provide brief details (no more than 100 words) of how you plan to spend the grant. **Please include how many older Tower Hamlets residents (aged 55+) you anticipate will benefit from your proposal** and, if known, any relevant locations and dates:

b) **Grant value:**

How much are you requesting? **Please note that the maximum grant available is £600.**

Data Protection Act

We will hold the information you have given on the application form and supporting documents on file. We may give copies of this information to individuals and organisations we consult when assessing applications, monitoring grants and evaluating our funding.

Tower Hamlets Council upholds the principles of the Data Protection Act Legislation and will hold on computer personal data supplied by you on this form or in any subsequent telephone conversation or correspondence during the course of our business relationship for the purpose of community development. The information held will be sourced from your employer or colleagues and may also be disclosed to your employer, colleagues, suppliers, providers of goods or services in relation to effecting repairs upon our computing equipment, employment recruitment agencies and education or training establishments and examining bodies. The information supplied by you will also be available widely within the public domain.

We may also share information with accountants, external consultants, organisations providing funding to your organisation and others with a legitimate interest in Council applications or grants and for the prevention and prosecution of fraud.

If you would like any information in relation to your rights please contact ESCW.InformationGovernance@towerhamlets.gov.uk

Freedom of Information Act

The Freedom of information Act 2000 gives members of the public the right to request any information that we hold. This includes information received from third parties. If information is requested under the Act we will release it, subject to exemptions, although we may consult you first. By submitting this form you therefore agree to the following:

I agree for you to process the information given so far and may give in the future for the purposes as shown above.

5. Declaration:

On behalf of the organisation / management committee, I declare that:

By submitting this form, I confirm that the information provided is accurate at the time of completion.

Signature:

Print Name:

Date:

6. Social Prescribing:

If you agree for your organisation name and purpose, and contact details (sections 1a to 1d and 2a to 2f) to be shared with social prescribers based at GP surgeries, in order to support patients with non-medical issues by helping them access support within their local community please tick the following box: