

### Application For Funding from Shetland Islands Council



This is Shetland Islands Council's corporate application form for all funding to be made to external organisations, it is a standard application used for all external funding across the Council. Each applicant for funding from the Council must complete this application; there are guidelines and help notes on its completion included in this application pack. Along with this application there may be supplementary information required by the department, which is funding your application.

**Before you fill in the form please make sure you have thoroughly read the guidelines and help notes.** This will help you when filling in the application form. You should also contact the relevant department and relevant member of staff, prior to completing the application to ensure you, your group or company is eligible to apply for grant aid.

In this application pack you will find

1. The centralised application form, which you should use to tell us about you or your organisation
2. Guidelines and help notes to complete the centralised application form

If the department funding the application requires any supplementary information this should be available on this website, however, if it is not please contact the relevant department who will issue you the required documents.

**You should note that all applications for funding must be made AT LEAST TWO MONTHS before the start of the project that funding is being applied for (e.g. if your project is due to commence on 4 June 2007, your application should be received NO LATER than 3 April 2007).**

In order to reduce the demand on the Shetland Islands Council's resources you should apply to all alternative funding sources, where appropriate, prior to applying to the Shetland Islands Council.

**The application form and enclosures should be completed neatly in black or blue ink** and returned to the relevant department in the first instance.

Failure to observe any of the conditions applicable to the project may involve repayment of the grant, and the applicant or applicant body may be disqualified from future assistance for grant schemes run by the Council. **Please note application forms will be returned if it is not completed correctly;** if you are unsure please contact the relevant officer.

**Which department are you requesting financial assistance from?**

*Please tick as appropriate*

Executives Services Department

- Chief Executive's Office
- Finance
- Housing and Capital Projects
- Legal and Administration
- Organisational Development

Education & Social Care Department

- Community Development
- Schools
- Social Work
- Children's Service

Infrastructure Services Department

- Environmental & Building Services
- Planning
- Roads
- Transport
  
- Ports & Harbours Operations
  
- Economic Development Unit

**Which grant are you applying for?**

**Applicant/Organisation/Business Name:**

## SECTION 1(a) – APPLICANT DETAILS

**Individual applicants** please go directly to section 2

**Q1** Name of Organisation

**Q2** Organisation address

Post Code

Contact telephone numbers (including area code)

Fax Number

E-mail address

Web Site

**Q3** Organisation type

We may need to report on how much money we award to each sector. Please tell us which sector your organisation is part of.

Public Sector

Private Sector

Voluntary and Community Sector

Other, please describe:

Please state whether the current/proposed business is/will be a sole trader, limited company, partnership or other (if 'other' please give details)

Sole Trader

Limited Company

Partnership

Other, please describe:

**Q4** Name of main contact for correspondence about this grant application

Title	First Name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position within the organisation/company

**Q5** Contact address  
*(leave blank if same as the organisation's registered address)*

<input type="text"/>	Post Code	<input type="text"/>
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Contact telephone numbers (including area code)

Daytime	<input type="text"/>	Evening	<input type="text"/>
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Contact e-mail address (if applicable)

## SECTION 1(b) – ORGANISATION DETAILS

**Q6** Please describe the nature of your current or proposed organisation

**Q7** When was your organisation/business formed?

Month	<input type="text"/>	Year	<input type="text"/>
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**Q8** Does your organisation have charitable status? Yes  No

If yes please state Charity Reference Number

Is your organisation/business registered for VAT? Yes  No

If yes please state VAT Registration Number

Does your company have a Registration Number? Yes  No

If yes please state Registration Number

**Q9** Is this business a subsidiary to any other? Yes  No

If so please state:

Do you have an annual written business plan? Yes  No

Do you have an annual marketing plan? Yes  No

Do you have an annual company training plan? Yes  No

Does you have public or employee liability insurance? Yes  No

**If yes to any of the above, please provide separate details with this application form and copies of documents where applicable.**

**Q10** Number of employees at the time of completing application

Full-time  Part-time  Volunteers

## SECTION 2 – INDIVIDUAL APPLICANT DETAILS

### TO BE COMPLETED BY INDIVIDUALS

**Q11** Name of main contact for correspondence regarding this grant application:

Title	First Name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Q12** Contact address (including full postcode)

<input type="text"/>		
<input type="text"/>	Post Code	<input type="text"/>

Contact telephone numbers (including area code)

Daytime	<input type="text"/>	Evening	<input type="text"/>
Mobile	<input type="text"/>		

Contact e-mail address (if applicable)

## SECTION 3(a) – PROJECT DETAILS

**Q13** Please briefly describe your project and provide details of how you would spend any grant awarded

**Q14** Please tell us why this project is needed

**Q15** Please tell us what you hope to achieve with this project?

**Q16** How will you know you have achieved the above?

**Q17** Please state how you will be affected if the funding applied for is not available

**Q18** Please provide an estimate of the start and end dates of the project and dates of any specific stages, if applicable

**Q19** How does your application link to the Council's Corporate Plan?

- Sustainable economic development
- Benefiting people and communities
- Looking after where we live
- Celebrating Shetland's cultural identity

**Q20** Please describe how your application links to the boxes you have ticked

## SECTION 3(b) – CHILD PROTECTION DETAILS

From 1<sup>st</sup> April 2008, if your organisation is applying for grant assistance from this scheme, and you provide services, activities or projects for young people up to the age of 18 years old, then you must comply with the requirements of the Protection of Children (Scotland) Act 2003. Your group must also have policies and procedures in place that adequately cover child protection and welfare issues.

**Q21(a)** Does your group organise activities for children and young people under the age of 18?

Yes  No

**Q21(b)** Does your group arrange activities attended by children and young people under the age of 18 and have staff or volunteers working in a 'childcare' position as defined in the Protection of Children (Scotland) Act 2003?\*

*\* See section 14 of the guidelines, for more information*

Yes  No

**If you answered no to both question 21a and 21b, go to question 25;**

**If you answered yes to either, or both, questions 21a or 21b, please complete questions 22, 23 and 24:** (Please note that if you have answered yes to either, or both, questions 21a and 21b, your organisation MUST have ALL of the following policies and procedures in place in order to receive any grant assistance.)

**Q22(a)** Does your organisation have an approved Child Protection Policy?

Yes  No

**Q22(b)** Does your organisation have an approved Child Protection Procedure?

Yes  No

**Q22(c)** Does your organisation have an approved Equal Opportunities Policy?

Yes  No

**Q22(d)** Does your organisation have an approved Code of Conduct for staff and volunteers?

Yes  No

**Q22(e)** Does your organisation ensure that staff or volunteers working in a 'childcare' position undergo an Enhanced Disclosure Check?

Yes

No

**Q22(f)** Does your organisation take reasonable steps not to appoint anyone who is unsuitable to work with children or who is disqualified from working with children?

Yes

No

**Q23** How does your organisation access Disclosure Checks for its volunteers?  
Please tick one of the following options:  
(tick)

Shetland Council of Social Service	<input type="checkbox"/>
National Governing Body	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>
Not Applicable (please let us know why. You should use the space below* to explain why your volunteers do not undertake Disclosure Checks)	<input type="checkbox"/>

**Q24** Are you satisfied that your organisation complies with the requirements of the Protection of Children (Scotland) Act 2003?

Yes

No

For more information on Child Protection requirements please refer to Section 14 of scheme guidelines. You may also wish to contact your local Community Office for advice or refer to the Shetland Inter-agency Child Protection Procedures that are available through a link from the Childsafe Shetland website:

<http://www.shetland.gov.uk/childsafeshetland/>

\*Please use the space below to provide us with any additional information:

## SECTION 4 – APPLICATION COSTS

**To be completed by all applicants**

**Q25** Please provide a summary breakdown of the costs of your project

Item or activity	Amount
Total cost of Project (A)	

**Other fund sources**

Funding Body	Amount	Secured
Total other funding (B)		
Your organisations contribution (C)		
Grant requested from Shetland Islands Council (D)		

*Please note, Total A must equal the total sum of B+C+D*

## SECTION 5 – FINANCIAL DETAILS

**Q26 to Q27** - To be completed by **all** applicants.

**Q28 to Q30** - To be completed by **organisations**.

**Q26** Please complete your bank details below.

Account Name

Bank or Building Society name

Bank or Building Society address

Post Code

Account sort code

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
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Account number (must be 8 digits)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Roll number (building society accounts only)

**Q27** How many people have to sign each cheque or withdrawal from this account?

**Q28** Name and address of Solicitor (if applicable)

Name of firm

Address

Post Code

Telephone Number

Fax Number

Name of partner

**Q29** Name of address of accountant/financial advisor (if applicable)

Name of firm

Address

Post Code

Telephone Number

Fax Number

Name of partner

**Q30** Please supply the following information from your most recent annual accounts

Accounts for financial year ending

Day  Month  Year

£

Total gross income

Minus total expenditure

Equals profit or loss for the year

Savings, reserves, cash or investments

## SECTION 6 – SIGNATURES

I/We understand that the guarantee shall submit to the council a copy of its annual report detailing its impact on the environment. This will include its energy, water and fuel use; waste arising; procurement practices and its targets for continuous improvement. Any examples of good practice for minimising environmental impact should also be detailed. The council are happy to provide these support audits for free to permit you to fulfil this condition.

I/We (delete as appropriate), as the authorised signatory/signatories of (name of individual, organisation, business) ..... hereby apply for financial assistance from Shetland Islands Council ("the Council") towards the cost of the project described in this application form, and hereby declare that the information given in this application form is correct to the best of my/our knowledge and belief.

I/We also undertake (on behalf of in the case of organisations/business) to inform the Council of any changes in the information provided in this form or of any changes in the circumstances which affects of may affect the project specified in this application form.

I/We undertake to provide the Council with any other information which it may require to process this application.

I/We understand that the information provided in this application form and in the supporting submissions will be used by the Council to perform a Risk Assessment, where applicable.

I/We understand that the information provided in this application form and in the supporting submissions may be made public. If there is any information contained in this application or supporting documentation which I/We do not wish to be publicised, I/We will inform the appropriate department accordingly.

**Anyone who knowingly makes a false declaration in order to obtain Council assistance fraudulently may be committing a criminal offence.**

- **Individual applicant** (This must be the signature of the detailed in section 2)

Signed.....

Print.....

Date.....

- **Group/Organisation** (This must be the signature of the main contact named in section 1(a))

Signed.....

Print.....

Date.....

Your Chairperson, Secretary or Treasurer must sign below. This must be a different person from that named above

Signed.....

Print.....

Date.....

- **Business** (This must be the signature of the main contact named in section 1(a))

Full names of Partners/Shareholders/Directors

Signed.....

Print.....

Date.....

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Signed.....

Print.....

Date.....

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Signed.....

Print.....

Date.....

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Signed.....

Print.....

Date.....

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Signed.....

Print.....

Date.....

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Signed.....

Print.....

Date.....

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Signed.....

Print.....

Date.....

## SECTION 7 – CHECKLIST

### We can only process your application if:

- You complete all applicable questions on this form;
- The proper people sign the form; and
- You enclose all the necessary documents.

### Please use this checklist to make sure you are sending us everything we need.

*(tick)*

We have answered all applicable questions on the form

The correct people have signed it, as required in section 6

### We have enclosed ALL necessary documents

A copy of our constitution/set of rules or Memorandum of Association and Articles of Association – **ONLY ENCLOSE** if this is your first application or your constitution/memorandum has been recently amended.

A bank or building society statement not more than three months old. (A photocopy is acceptable. Original statements will be returned)

**Or if you have a passbook**

A copy of the pages in our passbook, which shows my name or our group's/business name, account number and current balance

**Or if you are a new group/business** (with no bank statements)

A letter from our bank on their headed paper with our group's/business's account details.

Please enclose at least 2 quotations and/or any notes that you have used to work out your projects costs. The only exception to this would be if you can demonstrate that there is no alternative means of delivering this project, or for travel and accommodation costs.

A copy of our most recent annual accounts, dated, checked and signed by an auditor or individual independent of the group/business. (This person should not be related or married to a member of your committee.)

**OR** if you are a new group

An estimate of your income and expenditure for the first year, dated and signed as approved by our committee.

### Other Important Checks

We will ensure that this form is received at the relevant Council office **at least two months** before our project is due to start.

Our organisation is included in the online Shetland Community Directory and the details currently listed are up-to-date.

We have made a copy of this application to keep for our reference.

If you have ticked all the boxes above, your application should now be complete. We need to receive the completed application and ALL relevant enclosed documents to process your application. **If we do not receive all these things, we will have to return your application to you.....SO....double check** – just to be sure. Then send the completed application and the documents to the relevant Council office.

## **IMPORTANT NOTES RELATING TO PERSONAL AND CONFIDENTIAL INFORMATION**

### Data Protection 1998

The Shetland Islands Council is registered under the Data Protection Act 1998. Any personal information provided by you in this form will be used solely by the Council in connection with your application for grant assistance.

### Local Government (Scotland) Act 1973

It is normal practice for reports on applications for financial assistance to be considered in public. Normally, the only information which is exempt from the public is personal and financial details. However, the information provided in the application form and in the supporting submissions may be made public in reports to the Council or any of its relevant Committees if the Council Members decide, without your approval.

### Freedom of Information (Scotland) Act 2002

The Council reserves the right to publicise the assistance to the Applicant and to include it in a public record of cases, both to demonstrate how its resources are used to give examples of the types of development it is able to assist. The Applicant shall ensure that any publicity given to the Project contains an acknowledgement of the Council's funding support and shall display in a prominent place, and plaque, sticker or logo as the Council may require.

If there is any information contained in this application form or supporting documentation which you do not wish to be publicised, you should advise the relevant Council Department when you submit your application. Any requests for disclosure of such information may be discussed with you, however, it cannot be guaranteed that your information will be kept confidential.

### Data Protection Statement

The Department for Environment, Food and Rural Affairs (as data controller) requires details of the identity of recipients of de minimis aid in the agriculture and fisheries sectors, amounts of aid granted and date(s) of aid granted to be kept on a central register. Such data will be kept in order to comply with the provisions of Commission Regulation 1535/2007 on de minimis State aid in the agriculture and fisheries sectors and in particular to ensure that ceilings on the amount of aid granted are not breached. To this end, the data may be shared amongst any organisation granting de minimis State aid in the agriculture and fisheries sectors and will be passed to organisations responsible for upholding the provisions of Regulation 1535/2007 on request. Defra may also be required to release information, including personal data and commercial information, on request under the Environmental Information Regulations 2004 or the Freedom of Information Act 2000. However, Defra will not permit any unwarranted breach of confidentiality nor will Defra act in contravention of its obligations under the Data Protection Act 1998. There is a legitimate public interest in knowing how public funds are spent and so details of the amount of aid paid, the identity of the recipient, and other details may be disclosed under the Access to Information legislation mentioned above.

**FOR OFFICIAL USE ONLY**

- 1 Application form requested by  Date
- 2 Application form issued Date
- 3 Application form received Date
- 4 Application form acknowledged Date
- 5 Application approved/rejected Date

6 Supported by

**Officer Name**

Signature.....

Position.....

**Comment**

Date.....

- 7 Accounts received Date

Please indicate which type received, i.e., income & expenditure, bank statement, balance sheet

Checked by

**If applicable**

- 8 Grant amount awarded  Date
- 9 Ledger code grant paid from
- 10 If any grant repaid, amount  Date

Why repayment required

Project achievements vs original expected outcomes

Benefits to Shetland and its community