**Childminder Grant Scheme – Application Form Details/Questions**

**(THIS IS NOT AN APPLICATION FORM)**

**Information**

**This scheme can support local Childminders to:**

* **Start up a Childminding service**
* **Continue to provide a Childminding service**
* **Develop and improve a Childminding service**

**If you are a new Childminder, you should submit your initial grant application during the registration process.**

**Established Childminders must submit grant applications at least 4 weeks prior to the start date of any planned improvement**

**Applicants seeking financial assistance from this grant aid scheme must comply with Protection of Vulnerable Groups requirements - specifically child protection.**

**Please refer to Section 10 of the guidelines with regard to our use of the information you provide.**

**Failure to observe any of the conditions applicable to this scheme may involve repayment of part or the entire grant award, and you may be disqualified from future assistance from this or other grant schemes run by Shetland Islands Council.**

**Before you fill in the form please make sure you have thoroughly read the scheme guidelines.**

**You may also contact staff at the Grants Unit and/or Early Learning Childcare Team to discuss your proposal prior to completing the application form to ensure you are eligible to apply for grant aid and that the intended project(s) / service fits with our scheme requirements.**

**Applicant’s Details**

* Title
* First Name
* Surname
* Contact Address
* Top of Form
	+ Postcode (Please ensure there is no space at the beginning and the end of the valid UK postcode)
	+ Address
	+ If your address is not on the list above, please select ‘Other’ from the list and enter your address into the text box.
* Bottom of Form
* Contact Phone number
	+ Home
	+ Work
	+ Mobile
* Email address
* **If you are a new childminder currently going through the registration process, please go to Q4.**
* When was your childminding service registered?
* Please confirm your registration number
* We recognise that Childminders will only achieve Registration with the Care Inspectorate if they have appropriate Child Protection Policy and Procedures in place, and Enhanced Disclosure Checks have been carried out on all individuals in the household.
* Are you satisfied that your childminding service complies with the requirements of the Protecting Vulnerable Groups Act?
	+ Yes / No

**Project Details**

* How will the grant be used?
	+ Please briefly provide details of how you would spend the grant.
* Why do you think this project is needed?
* The following totals and grant requested are calculated automatically, based on the information you provide.
	+ Please ensure that you cost your project as accurately as possible.
	+ In the event that the actual cost of your project is less than you have estimated, you may be required to repay a proportion of the grant.
* Please provide a breakdown of the costs you would like us to fund.
	+ Please add a new line for each cost
	+ Include description and cost
* Total cost of Project
* Your contribution
	+ If zero, enter 0
* Grant requested
	+ Maximum £250

**Financial Details**

* Account Name
* Bank or Building Society name
* Bank or Building Society address
	+ Postcode (Please ensure there is no space at the beginning and the end of the valid UK postcode)
	+ Address
* Account sort code
* Account number
* Roll number
* Please supply the following information from you most recent annual accounts.
	+ Account for financial year ending
	+ Total Gross Income
	+ Minus Total Expenditure
	+ The form will automatically calculate Profit or Loss for Year
	+ Savings, reserves, cash or investments
* Does your childminding service have savings, reserves, cash or investments greater that £10,000?
	+ If yes, please specify the purpose for which these funds will be used.
	+ Please note that services with significant funds that are not specified as restricted or designated funds may not be considered for grant assistance.

**Finishing Your Application**

* We can only process your application if:
	+ You complete all the questions on this form
	+ You complete this checklist
	+ You send us all the necessary
* You must tick all the boxes below to confirm that:
	+ You have answered all the relevant questions on the form
	+ You understand that if you make any seriously misleading statements (whether deliberate or accidental) at any stage during the application process, or knowingly withhold any information, this could make your application invalid and you could be liable to repay any funding to us
	+ You meet our eligibility requirements as set out in our guidelines
	+ You understand and accept our obligations under the Data Protection and Freedom of Information Acts as set out in our guidelines
* Other important checks:
	+ Please use this checklist to make sure you are sending us everything we need
		- I will ensure that this form is received by the Grants Unit at least four weeks before my project is due to start.
		- My childminding service is included in the online Shetland Community Directory and the details currently listed are up to date
		- I have made a copy of this application to keep for our reference.
		- I understand that if I am are asked to provide any additional information, I must do so within 2 months of the date of receipt of this application, otherwise it will be withdrawn.

**Document Submissions**

* The form allows you to submit all necessary documents online
* These can be submitted as scanned documents from your computer, or as pictures from your mobile device using the field below.
	+ The maximum document size for upload is 1.1MB/document.
* Alternatively:
	+ You may email the appropriate documentation to **grants.unit@shetland.gov.uk**
	+ Or post it to the Grants Unit, Community Planning & Development, Solarhus, 3 North Ness Business Park, Lerwick, Shetland, ZE1 0LZ.
* Documents:
	+ A copy of our most recent annual accounts,
		- Maximum 2 documents
	+ Two quotes for any item or equipment or service costing over £500
		- Maximum 2 documents
* Name as Signature
* Date