



Leicester
City Council

For internal use only by Members Support Team:

Unique reference number _____

Date scanned in _____

This application will be considered as (please circle):

Ward Action Plan

Community Cohesion

Ward Community Fund

Ward Meeting Grant Application Form

Please read the "Guide to Ward Meeting grants and how to apply" before you fill in this form.

On completion please submit a signed paper copy of the form to:
Karen Shelton, Member Support Team, 2nd Floor, Town Hall, Leicester City Council, Leicester LE1 9BG. Fax No: 0116 229 8827

Continue on separate sheets if you need to, or expand the boxes if you are filling in the form electronically.

1. Name of Ward(s) to which you are applying for funding

WESTGOTES
ROWLEY FIELDS.

2. Name of your project/proposal

MANOR HOUSE ACTION GROUP.

3. Name of group or person making the application

AS ABOVE / RACHEL NEWBURY

4. Detailed description of proposal. Please tell us:

- What is the proposal (where and when)?
- If you are planning an event who will attend, and where will does your target audience come from?
- How will we know the proposal has been successful?

It is important that your answers to this question are clear so that the Ward Meeting can fully understand your proposal.

WE ARE HOLDING A PUBLIC MEETING TO DISCUSS THE CLOSURE OF THE MANDR NEIGHBOURHOOD CENTRE. WE WILL NEED TO LEAFLET BOTH WARDS (WHICH WE HAVE PREVIOUSLY DONE & ARE CLAIMING FOR). WE ARE HIRING THE HALL AT ST-MARK'S FIELDS INFANT SCHOOL AND PLAN, DUE TO THE HOT WEATHER, TO PROVIDE REFRESHMENTS. ALL OF THIS CAN BE RECOVERED FOR.

5. Have you attached any supporting information? YES NO
(Please tick)

6. Does your organisation have audited accounts? YES NO
(Please tick)

If yes please submit your latest set

7. Does your organisation have a constitution? YES NO
(Please tick)

If yes please submit your constitution

8. How much are you applying to the Ward Meeting(s) for? £ 250.00

9. Please show each item of expenditure and say whether it is an estimate or an actual cost. Costings should be as accurate as possible and in most cases be based on quotes. If it is an actual cost please provide quotes and any other written confirmation. In the final column please show which elements of your project you are applying to the Ward Meeting for?

Item	Cost £	Estimate or Actual cost (E or A)?	Request to Ward Meeting (£)
LEAFLETS	£50.00	E	£50.00
POSTERS	£10.00	E	£10.00
ROOM HIRE	£100.00	E	£100.00
REFRESHMENT	£5.10	E	£10.00
- PREVIOUS LEAFLETS	£25.00	E	£25.00
MISCELLANEOUS	£25.00	E	£25.00
Total			£220.00 £185.00

• amended by MLH on 01
with the agreement of Rada.

10. Have you obtained or are you trying to obtain funding for this project from anywhere else, either Leicester City Council or from another organisation? If so, please give details including:

Name, address, phone number and any other contact details of the funder.

The amount requested or received.

When do you expect a decision if you do not know already?

Please note that a failure to disclose any relevant information relating to other funding streams may result in your application being rejected or any offer of funding being withdrawn.

11. Details of recipient

If your application is successful the grant will be paid by cheque to your organisations bank account. Please provide the payee name which appears on the account.

R. NEWBURY
HAVE NO BANK ACCOUNT... BUT I'm PERSON PAYING / APPLYING FOR THIS
SO COULD BE PAID TO MY BARCLAYS ACCOUNT.
Alternatively if you wish to be paid by BACS please provide bank and sort code details on headed paper and attach to the application.

12. Declaration and contact details

I have read the 'Guide to Ward Meeting Grants' and I understand and accept the arrangements described in that guide. I confirm that the information I have given on this form is true. I will inform the council immediately if any of the information I have given on the form changes. I accept that Leicester City Council may reject this application or withdraw any funding provided if any of the information submitted is inaccurate.

I agree to complete a project evaluation form once the project has been completed (failure to do so may count against you receiving future funding).

Name of contact person	
MRS. R. NEWBURY	
Your position in organisation or group	
VOLUNTIARY MEMBER	
Name of organisation or group	
MANOR HOUSE ACTION GROUP	
Address	
[Redacted]	
Phone number	Email
0116 2918520	[Redacted]
Signature	Date
[Signature]	02/09/10

Please send this completed form back to:

Karen Shelton, Member Support Team, 2nd Floor, Town Hall, Leicester City Council, Leicester LE1 9BG. Fax No: 0116 229 8827

14.09.10

Failure to sign the form may result in delay in the processing of your application