



FOR INTERNAL USE ONLY

Unique reference number \_\_\_\_\_

Date scanned in \_\_\_\_\_

This application will be considered as (please circle):

Ward Action Plan

Community Cohesion

Ward Community Fund

2519

# 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, 2<sup>nd</sup> 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

LEICESTER CITY COUNCIL

10 NOV 2010

RECEIVED

MEMBERS SUPPORT

KNIGHTON

2. Name of your project/proposal

NEW CARPET FOR MEETING ROOM

3. Name of group or person making the application

STONEYGATE BAPTIST CHURCH

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.

As shown on the enclosed schedule of lettings our premises are used extensively for a variety of groups from the community. In one of the rooms the carpet has been down for approx 30 years, although cleaned many times, we now really need to replace it. Of the options quoted, we feel carpet tiles would be the best, so that, when necessary they can be moved round or replaced. Because of the state of the carpet, we are currently reluctant to use this room to its full potential. This year the Leicestershire Dyslexia Assoc held two national events at SBC + plan to return. 'Home Start' have just vacated the house in our grounds. Whoever moves in there will be welcome to use our premises for special events etc.

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? £ 410.00

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 (£)
CARPET TILES	£410	E	£410
Total	£410		£410

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.

No.

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.

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 ELIZABETH MARTIN	
Your position in organisation or group SECRETARY	
Name of organisation or group STONEYGATE BAPTIST CHURCH	
Address [Redacted]	
Phone number [Redacted]	Email
Signature E Martin	Date 29/10/10

Please send this completed form back to:

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

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

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