Community Grants 5 Application Form

Community Grants 3 (v1 Feb14)

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| **Important – PLEASE READ** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * ***Please be aware that the electronic form can not be saved throughout completion – we recommend that you use this template to enable you to cut and paste the written narrative answers on to the electronic form before submission.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1. Organisation details** - Please complete all of your organisation details in the boxes below | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organisation Name | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contact Name | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | |  | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Telephone | | | |  | | | | | | | | | | | | Mobile Number | | | | | | |  | | | | | | | | | | | | |
| E-mail Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Legal Status of Organisation | | | |  | | | | | | | | | | | | Company No. *(if applicable)* | | | | | | | | | | Charity No*. (if applicable)* | | | | | | | | | |
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| Annual Turnover | | | | £       (most recent) | | | | | | | | | | | | | £       (2 years ago) | | | | | | | | | £       (3 years ago) | | | | | | | | | |
| Date established | | | |  | | | | | | | | | | | | Number of FTE Staff | | | | | | | | | |  | | | | | | | | | |
| Please give details of your organisation’s 3 main funders and the approximate annual value (e.g. Lottery, Local Authority, include previous ESF Community Grants awarded). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Funder | | | | | | | | | | | | | | | | | | | | | | | | | | Annual Value | | | | | | | | | |
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| **2. Bank details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Account Name** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Account Number** | | |  | | |  |  | |  | |  | |  | |  | | |  | | **Sort Code** | | | |  | | |  |  | |  | | |  |  |
| **Bank Name** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Bank Address** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3. Due Diligence – Please complete all questions and ensure appropriate person validates the information submitted.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Names of Directors/Trustees** | | | | | | | | | | | | | | **Position held** | | | | | | | | | | | | | | | | | | | | | |
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| **Regulation 23 of the Public Contracts Regulations 2006 sets out a number of criteria for the rejection of organisations.**  These are; any organisation must be excluded, if they or any of its directors or any other person who has powers of representation, decision or control of the organisation has been convicted of any of the following:   * Conspiracy that relates to participation in a criminal organisation; * Corruption; * Bribery; * Fraud where the fraud affects the financial interests of the European Communities and falls within the meaning of any of the following: * the offence of cheating or defrauding Her Majesty’s Revenue and Customs or its predecessor organisations; * the offence of conspiracy to defraud; * fraud or theft under the Theft Act 1968 and the Theft Act 1978; * fraudulent trading under the Companies Act 1985; * an offence in connection with taxation in the European Community; or * destroying, defacing or concealing documents or procuring the execution of a valuable security within the meaning of section 20 of the Theft Act 1968 * Money laundering; * Any other offence within the meaning of Article 45(1) of the Public Sector Directive (noting that the only offence referred to in Article 45(1) of the Public Sector Directive which does not appear to be covered in the list above is participation in a criminal organisation, rather than conspiracy which relates to participation in a criminal organisation as mentioned above) * If relevant, is not properly licensed to provide services in the State in which the bidder is established; * Is not registered on the appropriate trade register in the Member State in which he is established (a UK or Irish bidder would be deemed to be registered on the professional or trade register if it is established in the UK and is certified | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Do any of the above criteria apply to your organisation or any of your directors or any other person who has powers of representation, decision or control of the bidding entity? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 1. Has your organisation or **directors/trustees** being **associated** with insolvency, voluntary administration, compulsory winding up, receivership, composition with creditors, company voluntary arrangements or subject to equivalent proceedings? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 1. Are any of the individual directors of your organisation or any other person who has powers of representation, decision or control of the bidding entity in a state of un-discharged bankruptcy or composition with creditors or subject to such proceedings? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 3a. Do you have any previous activities/funding that has resulted in repayment of monies to the funding body? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 3b. Have you failed to repay any monies due to the funding body? Please provide details - | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 3c. Are there any ongoing investigations relating to suspicion or fraud or irregularity under any existing contract with the funding body? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 4. General Block Exemption Rule (**GBER**) prohibits knowingly granting of aid to groups (undertakings) in difficulty, this also applies if the applicant is a daughter company of the group. Has an original group set up this organisation to benefit from future grants awarded to bypass any prohibitions? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 5. Has the organisation, its individual directors and any other person who has powers of representation, decision or control of the bidding entity ever failed to fulfil their obligations related to the payment of social security contributions? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 6. Has the organisation, its individual directors and any other person who has powers of representation, decision or control of the bidding entity been reprimanded or convicted of serious misrepresentation in supplying information required by English Law? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 7. Do you agree, at your cost, to obtain appropriate DBS checks for all your employees and tutors involved in delivering Education and Vocational Training services to vulnerable adults if applicable? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| **8.** Has your organisation had a contract from a public body terminated or withdrawn over the last 3 years\*?  ***\*If yes please provide details of public body and reason for termination in the space below)*** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
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| **4. Eligibility** - Please read the following statements and check the box to confirm your organisation is eligible. You must be able to **check ALL the boxes** below to confirm eligibility | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4a | The organisation is part of the voluntary and community/not-for-profit sector (this includes charities, social enterprises, not-for profit companies and community groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4b | The organisation has an independent bank account that the grant can be paid into | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4c | During the last full year of operations, the organisation’s turnover was less than £1,000,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4d | The organisation has fewer than 20 full-time equivalent staff (FTE = 30 hours) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4e | The organisation has not received funding **directly** from the European Social Fund (ESF), Education Skills Funding Agency (ESFA), or Department for Work and Pensions (DWP) in the last 12 months | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4f | The organisation has not received an ESF Community Grant **5** within the last 12 months **OR** a new application does not exceed the £20,000 limit in any 12 month period | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4g | If successful, this grant will not be used as match funding or to fund activities funded elsewhere | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4h | The organisation will ensure that all project participants are eligible e.g. age 18 or over **and** **not** **employed** *(as per eligibility details in application information pack)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4i | The organisation has a **signed and dated** constitution/governing document showing it’s not-for-profit status | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4j | The organisation has policies relating to European General Data Protection Regulations (**GDPR**), Equality and Diversity, Safeguarding (including **The Prevent Duty**)and Health and Safety | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4k | The organisation has in place both employers and public liability insurance as legally required **OR** enclosed a letter assuring that insurance will be in place by the start of the project | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 4l | The organisation has audited **OR** independently examined accounts **OR** for companies that have been operating for less than 12 months, can provide an independent financial referee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| **5. Main activities** - Outline the main activities of your organisation and who benefits from them? *(max 250 words – question for information only)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **6. Track record** – **Score 10** (max 500 Words)   * Provide evidence to demonstrate successful delivery and management of similar relevant activity, evidence should include contract performance outcomes and**lessons learned.** (If you have received an ESF Community Grant in previous rounds, you **must** include details of this project as part of your answer and provide detail of meeting contract compliance.) * Responses should include evidence of**remote/online learning platforms** and successful beneficiary engagement and outcomes, e.g. progression into work or further education, targets and success rates. * Provide evidence to demonstrate delivery of activity met the needs of your target priority groups.   If you are a new organisation and/or have no similar relevant delivery track record, please explain how you intend to deliver your project with evidence to support your response, e.g. this could include your staff skills and previous experience, activity plans and processes you have developed to identify the need for the project. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **7. Priority groups-** You must be targeting at least **one** of the target groups for the project. If none of the boxes apply or you have additional target groups, tick **other** and give the details. (Details of each box ticked to be described in section 8) -Please indicate how many numbers of each you propose, remember participants may fall within more than one target group | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lone Parents  Females  Disadvantaged communities | | | | | | | | | | People from ethnic minorities  People aged 50 and over | | | | | | | | | | | | People with health conditions or disabilities  Other(please state whom and number | | | | | | | | | | | | | |
| **8. Evidence of need –Score -10** (max 500 words)   * Describe why the project/activities are needed. * Clearly describe the specific barriers**including digital ability/capability**which may prevent the priority group (s) you have ticked (in question 7) from engaging in activities and moving into further education/learning and/or employment. * Explain how the project/activities will tackle these barriers and detail how these will help move participants into further education/learning and/or employment.   Provide details of local statistics, anecdotal evidence, participant feedback, waiting lists or **skills shortages** to demonstrate the need for the project in your target area. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **9. Recruitment and eligibility – Score – 10** (max 500 words)   * Clearly describe how you will promote and market your activities to participants **utilising online virtual platforms** i.e. social media * Explain your recruitment processes ie time spent marketing and planning. (Publicity must include correct use of ESF logo) * How will you ensure the right participants are recruited in line with the eligibility criteria for the ESF Community Grants 5 programme (unemployed/inactive, 18+, legal residency)?     How will you assess that your provision fits the needs of the individual and that the programme is right for them? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Primary Delivery Postcode**  ***(actual activity location)*** | | | | |  | | | | | | | | | **Humber** | | | | | | | | **East Riding** | | | | **York, North Yorkshire** | | | | | | | | | |
| Project Start Date **(dd/mm/yy)** | | | | |  | | | | | | | | | Project End Date **(dd/mm/yy)**  *No later than* ***March 2022*** | | | | | | | | |  | | | | | | | | | | | | |
| **Proposed number of participants** | | | | |  | | | | | | | | | **Approximate number of overall project contact hours per participant** | | | | | | | | |  | | | | | | | | | | | | |
| **10. Project summary** – **Score 30** (*max 1000 words*)  This is your opportunity to explain your project, you should include information about what your project aims to achieve. You should include how it will support participants and the main activities that will take place. Please provide a **detailed plan** of your proposed project, including the length of overall activity, number of sessions, guided contact/support hours, the method of delivery and how you will support progression targets into employment/further education.   * How is the program structured? Length x guided learning/contact hours * What are the aims of the provision on offer? * Type of activity to be accessed, delivery and teaching methods (including typical length of participation/contact time) * **How will the project deliver blended learning?** * What difference or change will your project bring about to the participant? * What additional support is provided to enable participants to achieve proposed aims? * How will the project encourage retention of participants to achieve your contracted outputs and results? * How will you work in partnership with employers and other learning providers to enable the project to achieve its contracted progression outcomes?   ***NB: Please ensure clear and precise information is detailed.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **10a. Project Contingency**  **Under the current circumstances due to the Covid – 19 situation, please describe contingency plans to enable the delivery of your Community Grants project to continue if restrictions are implemented.**   * Working from home strategies * Remote working resources * Online learning resources * Financial capacity - Adjustment of budgets to accommodate changes required. * Adaptation of learning/office environment to ensure the safety of all | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **11. Progression –** *(minimum into employment* ***17%****, further education/learning* ***16%****)*   * Please indicate how many of your participants may progress into employment. * Please indicate how many of your participants may progress into further education/learning.   ***(Progression output/result must be achieved within 28 days of the participants completion of the ESF Community Grant 5 funded activity)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **No. into employment** | | | | | | | | | | | | **No. into further learning/education** | | | | | | | | | | | | | | | | | | | | | | | |
| **12. Project Management – Score 10** *(max 500 words*) systems and resources utilised to achieve your project goals   Describe how you will manage the performance of the project and achieve your contracted targets.   * Explain what systems your organisation has in place to ensure high quality learning activities are delivered i.e. staff/tutor experience and/or qualifications, Continual Professional Development (CPD) * Describe your assessment processes for improving/developing your organisation * Describe how you will manage your project administrative processes to ensure correct and error free learner/project evidence is submitted to HLC/YCL to meet the ESF requirements. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **13. Detailed budget breakdown** – (Provide an itemised breakdown of your budget, giving as much detail as possible) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **How much funding are you applying for? (Between £5,000-£20,000) £** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Employees (staff budget) –** staff who are currently on the payroll and are employed by your organisation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Staff Name** | | | | | | | | **CG role (eg Project Manager)** | | | | | | | | | | | | | **Total Number of hours** | | | | **Hourly Rate** | | | | | | **Total Cost** | | | | |
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| **Freelance Costs –** including external tutors, project delivery, administration etc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Description of Activity** | | | | | | | | | | | | | | | | | | | **Total number of hours** | | | | | | **Hourly rate** | | | | | | **Total Cost** | | | | |
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| **Other Costs –** Venue hire, accreditation, marketing, stationery and participant expenses, **agreed** apportionment of office/running costs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Item description and details** | | | | | | | | | | | | | | | | | | | **Number and type of unit** | | | | | | **Cost per unit** | | | | | | **Total cost** | | | | |
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| **Capital purchases** NB: The total amount must not exceed £1,000 and **2** quotes must be provided for **each** capital item (second hand items are ineligible) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Item description and details** | | | | | | | | | | | | | | | | | | | **Number and type of unit** | | | | | | | **Cost per unit** | | | | | **Total cost** | | | | |
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| **Total amount claiming** (this must match the specified amount above). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **£** | | | | | | |
| **14. Financial Monitoring – Score 10** (max 400 words)   * Please provide details of how your organisation will ensure that all monies received from the grant will be evidenced during the lifetime of your project. * Describe the financial processes and controls your organisation has or will put in place to track spend effectively. * Consideration must be made to the types of expenditure as specified in the budget breakdown above. *(including petty cash and proof of cleared payments identified on your bank statements within the contract period)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **15. Health & Safety, Safeguarding and Prevent** – **Score 5** (max 300 words)   * Give details of where the activity will take place * Describe the resources, skills (including relevant staff qualifications) and experience in relation to the above factors * Describe any risks within your project and how you will manage these including Covid-19 government recommendations. * What measures you will put in place to minimise the impact of any risks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **16. Equality & Diversity and Sustainable Development** **– Score 5** (max 300 words)   * How will you ensure E&D and SD are considered in all aspects of your project? * Describe the resources, skills and experience staff have in relation to the above factors. * What systems do you have in place to measure the impact on participants?   (*NB: CG5 Sustainable Development Survey to be circulated for completion if your application is successful)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **17. GDPR –** (max 250 words)  How will you ensure that all GDPR requirements are considered during the entirety of your project? Attention should focus on the capturing and processing of learner paperwork alongside financial information.  *(NB: CG5 Processor Agreement to be circulated for completion if your application is successful)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **18. Insurances** – Tick to confirm that you hold the following insurances (if required) and state the value of cover | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employers Liability Insurance Yes  No  Value of cover £  Public Liability Insurance Yes  No  Value of cover £ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **19. Declaration** –Please read the below declaration and sign your agreement on the electronic version. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * I confirm that the information in this form is correct. If an ESF Community Grant is awarded, it will only be used for the purpose given and according to any conditions specified. * I agree to provide all additional documentation required. * I understand that we will be liable to repay any grant monies received if it is found that any information supplied is incorrect or if any grant monies that may be awarded are not used as indicated in this application. * I agree to Humber Learning Consortium (HLC)/Your Consortium Ltd (YCL) undertaking a credit check as part of the application process. * I understand that if a grant is awarded, the details of that grant may be subject to further contractual negotiation. * If successful, we agree to complete a **General Data Protection Requirement (GDPR)** Processor agreement, Health and Safety declaration as part of the grant award process and to attend the mandatory Contract Compliance Workshops. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **20. Checklist - If your application achieves the scoring threshold and an offer in principle is proposed, the following confirmed documentation is required to be submitted:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Have you completed all the questions? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Has the declaration been signed and dated on the electronic version by the person submitting the form? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have an up to date Health and Safety Policy? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Due to the Covid -19 situation you will be required to submit an up to date Risk Assessment to ensure your organisation and participants are adhering to government guidelines | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have an up to date Adults Policy including the Prevent Duty? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have an up to date Equality and Diversity Policy? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have an up to date GDPR policy? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have a signed and dated governing document/constitution? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have employers/public liability insurances **OR** a letter of assurance if required that these will be in place before delivery commences? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have a copy of your most recent audited **OR** independently examined accounts? **OR** if you are a new organisation, a reference form an independent referee must be provided? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | Does your organisation have a copy of the most recent bank statement that shows the account name, account number and sort code? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | If you have applied for funding to purchase capital equipment, please ensure you collect 2 relevant quotes for each capital equipment applied for? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |