**The Church Welfare Association (INCORPORATED)**

**Charity Registration Number: 209992**

Founded to assist women involved in prostitution we remain focussed on support for vulnerable women especially those involved in sex work but we also welcome applications for parenting and family support.

All applications must demonstrate a close local link with the Church of England.

APPLICATION FORM FOR A GRANT FOR AN ORGANISATION

Only typewritten applications will be considered and MUST be sent via email as well as a signed hardcopy, to addresses found on the final page.

**A**

Name of Organisation:

Name of Project

Website:

Church of England Diocese in which project is situated:

Contact person & role:

Address for correspondence:

Telephone:

Email Address:

### B

### Description of applying organisation:

(Please indicate which apply)

Self-help group Registered Charity

Voluntary Association Charity Number

**C** What are the aims and objectives of the organisation?

**D** Who is your client group?

Approximate number of users (in an average week):

**E** What are the organisations resources?

a) Premises (owned, rented, housing association?)

b) Equipment (if applicable)

c) How many staff employed by the organisation?

Paid full-time:

Part-time:

Voluntary:

|  |
| --- |
| **F** Please describe the particular project, for which you need funding why it is necessary and who will benefit. Please include details of how the need you are addressing has been assessed. |

**G** What links does project have with the Church of England?

**H** What is the start date for the project?

Have you received funding from The Church Welfare Association in the past?

On what date was it allocated?

**I** Costs: please provide a breakdown of all costs involved in year one of the project, with as much detail as possible. (If you prefer, please attach your budget as a separate sheet.)

Expenditure Year 1

Total cost of project £

**J** Income: Please provide a breakdown of all income, grants and donations for the project, with as much detail as possible. (A budget may be attached.)

J.1 Grants from award-giving bodies

Source Is this confirmed? Year 1

**Total Grants £**

J.2 Project Revenue

Source How calculated? Year 1

**Total £**

J.3Donations in kind (e.g. volunteer time)

Source How calculated? Year 1

**Total £**

J.4 **TOTAL INCOME FOR PROJECT £**

**K** What amount of grant are you seeking from the Church Welfare Association?

To whom should the cheque be made payable in the event of the application being successful?

**L**

What monitoring do you have in place to measure the effect of how the project’s objectives are being met?

**M** Who will be responsible for managing the project? Describe how this will be achieved.

**N** Supporting documents - please supply digital copies by email to [markhey@gmail.com](mailto:markhey@gmail.com) of:

+ Your last annual report and accounts (unless first year of operation)

+ A copy of your or your umbrella organisation’s safeguarding policy

**O**

Applicant’s Signature: Name:

Date: Role:

**P** A Diocesan Officer, Archdeacon or Bishop who is not directly involved with the organisation or project must support this application.

Signature Name:

Date Position in Diocese:

E mail address:

PLEASE RETURN THE COMPLETED & SIGNED HARD COPY TO:

Mark Heybourne

Honorary Secretary

Church Welfare Association

C/O

25 Cottinghams Drive

Hellesdon,

Norwich NR66PS

ALSO EMAIL SOFT COPY OF APPLICATION FORM TO (unsigned is fine):

[markhey@gmail.com](mailto:markhey@gmail.com)

NO APPLICATIONS CAN BE CONSIDERED UNITL BOTH SIGNED HARD COPY & EMAIL SOFT COPY OF APPLICATION & SUPPORTING DOCUMENTS HAS BEEN RECEIVED.

Thank you for taking the time to complete this application.