**COMIC RELIEF GLOBAL MAJORITY FUND – WALES**

**APPLICATION FORM**

*This application form is in WORD format. Note word limits where applicable. Please attach all the documents requested. Guidance notes on answering each question are provided in the supporting information.*

1. **Your organisation**

|  |  |
| --- | --- |
| * 1. **Basic details** | |
| Organisation name |  |
| Registered name (if different from above) |  |
| Organisation address |  |
| Organisation telephone number |  |
| Organisation email address |  |
| Organisation web address (if appropriate) |  |
| First contact name |  |
| First contact home address |  |
| First contact telephone number |  |
| First contact email address |  |
| Second contact name |  |
| Second contact home address |  |
| Second contact telephone number |  |
| Second contact email address |  |

|  |  |
| --- | --- |
| * 1. **Legal details** | |
| Legal status (Registered body or constituted group) |  |
| Registration body (if appropriate) |  |
| Registration number (if appropriate) |  |
| Is your organisation legally affiliated with any other/s? (If yes, please provide details) |  |
| Date your organisation was established |  |

|  |  |
| --- | --- |
| * 1. **Board member details** | |
| List the full name of each Board Member accompanied by their mobile number |  |

|  |  |
| --- | --- |
| * 1. **Board family connections** | |
| List the names of all Board members who are related. Also state whether at least 3 Board members are not related. |  |

|  |  |
| --- | --- |
| * 1. **Bank Account details** | |
| Name of Bank |  |
| Account name |  |
| Branch address |  |
| Bank sort code |  |
| Bank account number |  |
| Date on which the account was opened |  |
| The full names of all individuals with authority to approve expenditure from the account |  |
|  |
|  |
| ***Please attach a copy of the most recent bank statement*** | |

|  |  |
| --- | --- |
| **1.6 What does your organisation do (Maximum 250 words)?** | |
|  | |
| Number of Full time Staff |  |
| Number of part/time staff |  |
| Number of Volunteers |  |

|  |  |
| --- | --- |
| **1.7 Where in Wales does your organisation work?** |  |

|  |  |
| --- | --- |
| **1.8 How many years has your organisation been active in the community?** |  |

|  |
| --- |
| **1.9 How is your organisation Black Asian and Minority Ethnic led?** *(Evidence your answer with reference to your Board members, staff and volunteers)* |
|  |

|  |  |
| --- | --- |
| **1.10 Does your governing body have at least 3 members who are not related?** | **Yes/ No** |

|  |  |
| --- | --- |
| **1.11 Does the work for which you are seeking funding promote religious belief?** | **Yes/ No** |

|  |  |
| --- | --- |
| **1.12 Does the work for which you are seeking funding have a Party Political nature?** | **Yes/ No** |

**2. Your proposal**

|  |
| --- |
| **2.1 What has the impact of COVID-19 been on a) your organisation, and b) the people you help? (Maxim 250 words)** |
|  |

|  |
| --- |
| **2.2 Describe your proposal and state its purpose, what you intend to achieve and how it will address the needs and measurable outcomes (Maximum 250 words)** |
|  |

1. **Your funding request**

|  |  |
| --- | --- |
| **3.1 What is the full cost of your proposal?** |  |
| **3.2 How much are you applying for from us?** |  |
| **3.3 How will you fund the difference?** *(if appropriate)* |  |
| **3.4 Provide details of what the grant will fund.** |  |
| **3.5 How many Black Asian and Minority Ethnic people will benefit from your proposal? And how you worked this out?** |  |

1. **Your finances**

|  |  |
| --- | --- |
| **4.1 Organisation finances** *(Please attach a copy of your last Annual Accounts or Management Accounts if available)* | |
| The date on which your organisations current financial year will end |  |
| Income during the last accounting year |  |
| Expenditure during the last accounting year |  |
| Reserves recorded at the end of the last accounting year |  |
| **4.2 Does your bank or building society account have at least two signatories who are not related or two online users who are not related**? | **Yes / No**  **Yes/ No** |

1. **Your policies**

|  |  |
| --- | --- |
| **5.1 Does your organisation have an Equality/Diversity policy?** *(attach)* | Yes /No |
| **5.2 Does your organisation have Safeguarding policies to cover all your activities?** *(attach)* | Yes/No |

**6. References**

|  |  |  |
| --- | --- | --- |
| **6.1 Provide the names and e-mail addresses of 2 individuals who can provide a reference for your organisation and its activities. Please state in what capacity you know them ie referral partner.** | | |
|  | | |
| **6.2 Attach all the necessary documents.**   1. Governance document *(If you are a constituted organisation attach your constitution)* 2. Annual accounts - your most recent set of annual accounts *or management accounts.* 3. Copy of most recent bank statement 4. Safeguarding Policies *(If available)* 5. Equality and Diversity Policy *(If available)* 6. *Financial Procedures* 7. *At least 2 Board Minutes.* | | |
| **6.3 Declaration** | | |
| Authority to apply *(Please indicate in the right-hand column)* | | |
| I confirm that the organisation named on this application has given me authority to submit this proposal on its behalf. *(This individual will be required to sign a grant contract if your application is successful).* | | Yes/ No |
| **Signature**  …………………………………………………………………………. | | |
| Full Name (in capitals):  Position in the organisation: | Date: | |

**Please send this application as an attachment to** [**grantsteam@GMFundWales.co.uk**](mailto:grantsteam@GMFundWales.co.uk)

**or refer to any of the following websites** [**https://racecouncilcymru.org.uk/**](https://racecouncilcymru.org.uk)**;** [**https://bawso.org.uk**](https://bawso.org.uk/) ***;*** [**https://wrc.wales/**](https://wrc.wales/  %20) **for details**

**Call 0800 048 5770 *during working hours from 09:00 till 17:00 or leave a message.***