



community food and health (scotland) Small grant scheme application form



For office use only

Please read the guidance notes before filling in the form.

There are also notes next to each question to help you. Please write clearly in black ink or type. A Word version of the form (that you can type directly into) is available from www.communityfoodandhealth.org.uk.

A large-print version is also available or call us for a copy.

Notes

Please tell us the name and full address of the group or agency that will receive the grant if your application succeeds.

The contact person should be reasonably easy for us to contact and must be directly involved in the proposed work.

1. Applicant

Name of your group or agency

Address and postcode

.....

Tel Email

Web

Contact person

Address (if different from your group or agency's address)

.....

.....

Tel

Email

Notes

Please tell us briefly the main activities of your group, who benefits from its work and how your group is managed. Please include information about any food-related activities that you already provide, such as snacks or meals, cookery classes, food co-ops.

2. About your group or agency

Please tell us briefly about your group or agency

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Notes

3. Paperwork and management

Please show what paperwork your group or agency has, or intends to have, by ticking the relevant boxes

	Has	Intends		Has	Intends
Constitution	<input type="radio"/>	<input type="radio"/>	Minutes	<input type="radio"/>	<input type="radio"/>
Bank account (this is required)	<input type="radio"/>		Financial procedures	<input type="radio"/>	<input type="radio"/>
Steering group	<input type="radio"/>	<input type="radio"/>	Management committee	<input type="radio"/>	<input type="radio"/>
Monitoring procedures	<input type="radio"/>	<input type="radio"/>	Final evaluation of this work	<input type="radio"/>	<input type="radio"/>

Notes

Tell us briefly about the people who will take part in this work. This could include volunteers, staff, as well as people who use your services.

If you receive a grant from us, what food and health activity or activities will you set up? Tell us how you will develop or deliver the work.

If you have told us in Q2 about any food-related activities, please tell us of any plans you have to develop them.

We expect you to spend the money within 12 months of receiving it.

Tell us how you know there is a need for this work. This could include information you have gathered from speaking to people who already use, or might use, your services.

Tell us why you think this work is important to those who will benefit from it.

4. About the food and health activities you are planning

Who will benefit from this work?

Please give a title and brief description of your planned work

When do you plan to spend the money?

Why do you need to do this work? What difference will this work make to those you work with?

Notes

Tell us if you have any ideas or plans about how you could continue some or all of the work after spending the money we provide.

Tell us about any ideas or plans you have to learn from, monitor or evaluate the work.

Please continue on a single A4 sheet (one side only) if you need to, and attach it securely to your form.

Do you have any long-term plans for the future of this work?

How will you find out if your work has succeeded?

Have you attached another sheet?

Yes No

Notes

Try to give an accurate costing. Find out the going rate for any goods or services. If you need any money to buy food, please tell us what food you plan to buy.

The amount must be between £500 and £4,000.

5. Money

How much money do you want from us? Please give us a breakdown of these costs.

Item/description

Cost (£)

TOTAL

Notes

Please include **advice** and **support** from other organisations or partners as well as **money** or **help in kind** (such as staff time, equipment, facilities, crèche). Tell us if this help depends on you receiving this grant.

6. Help from others

Do you intend to get help from anyone else for this work. If yes, please give details

Yes No

Notes

Your referee should be someone who has a good understanding of your application and your group, but who is not part of your group or agency. He or she could be a community dietitian, community worker, local councilor, health promotion specialist, etc.

We will follow up all references for successful applicants.

7. Referee

Name of referee

Position or job title

Address

.....

.....

Tel

Referee's signature

Email

Notes

Contact person's signature

8. Signature

Signature

Date

Do you want to sign up to hear about food and health work?

Community Food and Health (Scotland) produces a free quarterly newsletter called Fare Choice, which can help keep you up to date with current food policy, what other food and health projects are doing, funding opportunities, events and latest publications.

Tick here if you would like to receive Fare Choice

Do you want others to know about your food and health work?

We have an online directory that outlines what groups and agencies are doing to improve food and health throughout Scotland. The directory includes contact details of groups.

Tick here if you would like to have details of your group's food and health activities included in our directory

We will publish your group or agency's contact details. We will not use your home contact details. We may need to contact you to find out more details for our online directory



Please return to: Small Grants Scheme
Community Food and Health (Scotland)
c/o Consumer Focus Scotland, Royal Exchange House
100 Queen Street, Glasgow G1 3DN

Tel: 0141 226 5261

Closing date:

Faxed or email applications are not acceptable.