

Coronavirus Resilience Fund Application Form

The Coronavirus Resilience Fund has been set up to support smaller constituted organisations (**with a set of rules and an income of less than £250,000**) to respond to the growing emergency and make sure they get the support they need. Heart of England Community Foundation are committed to ensuring support gets into communities as quickly as possible, so those most at risk get the help they need.

<p>Contact Name:</p> <p>Organisation Name:</p> <p>Address:</p> <p>Telephone Number(s):</p> <p>Email:</p>
<p>Please describe how your organisation will be responding to the Coronavirus emergency. Explain how the project will benefit local vulnerable people, how the money will be spent and how you know the project is needed. (500 words max)</p>

<p><u>Beneficiaries</u> – tell us about the members of your community this grant will support</p>
<p><u>Project Budget</u> – please give as detailed a breakdown of the project as possible</p>
<p><u>Which geographical area will your project take place in?</u></p>
<p><u>Are you working with any other organisations to deliver this response?</u></p>
<p><u>Bank Details:</u></p> <p>Bank address:</p> <p>Sort code: Account number:</p>

Please return this Application Form to info@heartofenglandcf.co.uk, along with a copy of a recent bank statement and please confirm you hold the following:

- A copy of your constitution or governing document
- A copy of your most recent annual accounts
- Your organisation's Safeguarding Policy
- Your organisation's Equal Opportunities Policy
- Names and addresses of your management committee

- Please tick here to confirm that your organisations income is less than £250,000p/a
- PUBLICITY - Please tick to confirm that you are happy for us to contact you to discuss the impact of your project

I understand that I may be requested to supply any of the listed documents above to support the application and confirm that all the details we have supplied are correct.

Signed

Print name

Date

Equalities Monitoring (Please tick)

Beneficiaries

Primary Beneficiary - Select a single option to represent the primary beneficiary group for this grant _____

Please list any other beneficiary groups who will benefit from your grant

- | | |
|--|---|
| Black, Asian and minority ethnic | Carers |
| Children and young people | Ex-offenders/offenders/At risk of offending |
| Families/Parents/Lone parents | Homeless people |
| Lesbian, gay, bisexual and transgendered groups | |
| Local residents | People with alcohol/drug addictions |
| Long-term unemployed | Men |
| Not in education, employment and training (NEET 16-24) | |
| People in care or suffering serious illness | |
| People with learning difficulties | People with low skill levels |
| People with mental health issues | People with multiple disabilities |
| People with physical difficulties | People living in poverty |
| Refugees/asylum seekers /immigrants | |
| Victims of crime/violence/abuse | Women |

Age Groups

Please indicate the primary age group that will benefit from this grant

Please list any other applicable age groups for your grant.

- | | |
|----------------------|----------------------|
| Early years (0-4) | Children (5-12) |
| Young people (13-18) | Young adults (19-25) |
| Adults (26-65) | All ages |

Ethnicity

Primary ethnic group - select a single option to represent the primary ethnic group for this grant

Please list any other ethnic groups who will benefit from your grant:

- | | |
|---------------------------|------------------------------|
| African | Any other |
| Asian and Asian | British Asian and White |
| Bangladeshi | Black African and White |
| Black Caribbean and White | Black and Black British |
| Caribbean | Chinese |
| Chinese or other group | Indian |
| Mixed | Other Asian |
| Other Black | Other Mixed Ethnicity |
| Other White | Pakistani |
| White | White British |
| White East European | White Gypsies and Travellers |
| White Irish | |