

Covid-19 Charity Fund - Application Form - Part A

* Required

Eligibility Checklist

1. Please ensure you can tick yes in each box to confirm your organisation's eligibility. If the answer to any of these questions is No, we're sorry you're not eligible to apply for this funding. *

Was your organisation formed before 31 March 2020? And is it a lawfully operating charity as defined by the Charities Act (NI) 2008?

Does your charity have at least two unrelated people on its board or committee? By unrelated, we mean people who are not: related by blood to each other; married to each other; in a civil partnership with each other; in a long-term relationship with each other; or living together at the same address.

Are you applying for up to £75,000 of funding?

Is this the only application that is being submitted to this round of the charity fund for your charity?

Do you have a UK bank account or building society account? It needs to be in the legal name of your charity, with at least two unrelated people who can manage the account? By unrelated, we mean people who are not: related by blood to each other; married to each other; in a civil partnership with each other; in a long-term relationship with each other; or living together at the same address.

Has your charity's fundraising or trading income been reduced due to the impact of COVID-19?

Does your charity have costs it can't avoid up to 31 March 2021, which cannot be covered by existing grants or public funding? And is your charity therefore at imminent risk?

Organisation Details

2. Organisation Legal Name - What is the full legal name of your charity, as shown on your governing document? *

3. Other Organisation Name - If your charity uses a different name in your day-to-day work, please tell us *

4. Is your charity independent, or a branch or department of a larger parent charity? *

- Independent
- Branch or department of a larger parent charity

5. Key Contact Name *

6. Position Held *

7. Email Address *

8. Contact Number (Mobile) *

The value must be a number

9. Organisation Address (Building No.) *

10. Organisation Address (Street 1) *

11. Organisation Address (Street 2)

12. Organisation Address (Town / City) *

13. Organisation Address (County) *

14. Organisation Address (Postcode) *

15. Organisation Address (Local Council Area) *

- Antrim & Newtownabbey
- Ards & North Down
- Armagh City, Banbridge, & Craigavon
- Belfast City
- Causeway Coast & Glens
- Derry City & Strabane
- Fermanagh & Omagh
- Lisburn & Castlereagh
- Mid & East Antrim
- Mid Ulster
- Newry, Mourne, & Down

16. Charity Number (if applicable)

17. Legal Status *

- Company Limited by Guarantee
- Unincorporated Association
- Other

Area of Main Activity

18. Please select the Charity's Main Area of Activity *

- Arts & Heritage
- Childcare
- Community Services
- Education & Training
- Enterprise & Workspace
- Environment
- Health & Social Care / Wellbeing
- Housing
- Tourism
- Youth
- Sports
-
- Other

19. If you answered "Other" above, please specify

Charity size

20. Please select the charity's latest year's income per its financial statements *

- £0 - £100,000
- £100,000 - £250,000
- £250,000 - £500,000
- £500,000 - £1,000,000
- £1m - £5m
- Over £5m

Volunteer / Employment figures

21. No. of Volunteers *

The value must be a number

22. No. of Part Time Employees *

The value must be a number

23. No. of Full Time Employees *

The value must be a number

24. Total No. of Employees *

The value must be a number

Beneficiaries

Who benefits from your charity?

25. Beneficiaries - Does your charity benefit everyone or is it aimed at a specific group of people?

We want to know who your charity usually supports on a day-to-day basis. What do we mean by specific groups of people? - A wheelchair sports club is a place for disabled people to play wheelchair sport. So, this is a project that's specifically for disabled people. Or a group that aims to empower African women in the community—this group is specifically for people from a particular ethnic background. *

Yes

No

26. Does your charity mostly benefit people from a particular age group? *

No

0 – 12 years

13 – 24 years

25 – 64 years

Over 65 years

27. Does your charity mostly benefit people with caring responsibilities? *

Yes

No

28. Does your charity mostly benefit disabled people? *

Yes

No

29. Which community do the people who benefit from your charity belong to? *

Both Catholic and Protestant

Mainly Catholic (more than 60 percent)

Mainly Protestant (more than 60 percent)

Neither Catholic nor Protestant

30. Does your charity mostly benefit people from a particular ethnic background? *

- No
- White - English/Scottish/Welsh/Northern Irish/British
- White – Irish
- White - Gypsy or Irish Traveller
- Any other white background
- African
- Caribbean
- Any other Black/African/Caribbean
- Indian
- Bangladeshi
- Chinese
- Pakistani
- Any other Asian background
- Mixed / multiple ethnic background
- Arab
- Other ethnicity

31. Does your charity mostly benefit people identifying as lesbian, gay or bisexual? *

- Yes
- No

32. Does your charity mostly benefit people from a particular gender, and if so, please tell us which one(s)? *

- No
- Male
- Female
- Trans
- Non-Binary
- Intersex

33. Does your charity mostly benefit people from a particular religion or belief, and if so, please tell us which one? *

- No
- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- Other religion or belief
- No religion

34. Does your charity mostly target any other specific groups of people that are not mentioned above? *

- Yes
- No

35. If you answered Yes above, please provide details below about who your activity is targeted at. (Max. 200 words)

Grant amount requested

36. What is the amount of unavoidable costs incurred by the charity between 01 October 2020 and 31 March 2021 (per the Financial Overview Template in Part C)? *

Senior Contact

Please give us the contact details of a senior member of the organisation

Your senior contact must be at least 18 years old and is legally responsible for ensuring that this application is supported by the organisation applying, any funding is delivered as set out in the application form, and that the funded organisation meets our monitoring requirements.

The senior contact needs to be either a:

- Director or Company Secretary - Incorporated Charity (We would expect the senior contact to be named on the charity's Companies House website)
- Chair, Vice Chair, Treasurer or Trustee - All other types of charities (as defined by the Charities Act (NI) 2008)

37. Name

38. Date of birth *

39. Position

40. Email address

41. Telephone no. *

42. Address Line 1

43. Town / City *

44. County *

45. Postcode *

Main Contact

Please give us the contact details of a person we can get in touch with if we have any questions. The main contact is usually the person filling in the form—so it's probably you.

The main contact needs to be from the organisation applying, but they don't need to hold a particular position. They need to be at least 16 and have an understanding of the current financial status of the charity.

The main contact must be a different person from the senior contact. The two contacts also can't be:

- related by blood to each other
- married to each other
- in a civil partnership with each other
- in a long-term relationship with each other
- living together at the same address

46. Name *

47. Date of birth *

48. Position *

49. Email address

50. Telephone No.

51. Address Line 1 *

52. Town / City *

53. County

54. Postcode *

Bank Details

Please provide organisation bank details

55. Bank Account Name *

56. Bank Sort Code *

57. Bank Account Number

State Aid

State Aid is only present when a charity is carrying out an economic activity - i.e. offering goods or services on a market (and competing against other private sector businesses).

Please note: if the answer to either of the questions below is 'No', then State Aid would not be present and the de-minimis declaration is not required. If the answer to both of these questions is 'Yes', then State Aid is likely to be present and, if successful with your application, you will be asked to complete the De-Minimis Declaration as part of your grant award.

To decide if State Aid is present please answer the following two questions:

58. Are you an undertaking? e.g. do you provide goods or services on a market directly in competition with private sector businesses? *

Yes

No

59. Do you provide goods and services beyond your local area? e.g. do you attract any customers from another Member State (for example Republic of Ireland)? *

Yes

No

Application Form Part B - Charity Support and Covid-19 Impact

Please ensure you complete Part B of the Application Form which will ask you to provide further detailed information to enable us to understand how the community relies on your charity to deliver essential services, the impact of Covid-19 on your charity and the actions you are taking to reduce the financial impact on your charity.

Please ensure that this completed Word document is emailed to [email address] along with the other required documentation.

60. Application Form Part B - Charity Support and Covid-19 Impact completed *

Yes

No

Application Form Part C - Financial Overview Template

Please ensure you complete the Part C of the Application Form - Financial Overview Template to enable us to understand any financial difficulties you might be facing because of Covid-19

Please ensure that this completed Word document is emailed to [email address] along with the other required documentation.

61. Application Form Part C - Financial Overview Template completed *

Yes

No

Other documentation required

62. Please confirm the following documents have been supplied by email along with Part B - Charity Support and Covid-19 Impact, Part C - Financial Overview Template, the Equality Monitoring Form and the State Aid De-Minimis Form (if required)
FAILURE TO FORWARD ANY ONE OF THESE DOCUMENTS WILL RESULT IN THE APPLICATION BEING DECLINED.

- Latest published accounts (2019 or later)
- Management accounts for the current financial year
- Latest bank statement
- Reserves policy
- Photo ID and proof of address for two trustees and the main contact

Declaration

63. I confirm that I have forwarded by email the Other Documentation Required and recognise that failure to do so will result in the application being rejected. *

Yes

No

64. You have been authorised by the governing body of your charity (the board or committee that runs your charity) to submit this application and accept the terms and conditions set out on their behalf. *

Yes

No

65. You have been authorised by the person named as Senior Contact to include them in this application and submit their details to us in this form.

Yes

No

66. You understand that any grant offered to your organisation will be subject to the terms and conditions of the fund. *

Yes

No

67. All the information provided in this application is accurate and complete and you will notify us of any changes.

Yes

No

68. You understand that we will use any personal information you have provided for the purposes described under our data protection and privacy notice which you can find on our website.

Yes

No

69. We agree that the information herein may be made available to other Government Departments and Partner Agencies.

Yes

No

70. We also accept that the award of this grant may be published by the Department for Communities. *

Yes

No

71. We understand that the Department for Communities and Partner Agencies can contact an awardee organisation for monitoring information and at any time ask to see any supporting evidence in relation to this application. *

Yes

No

Signatories

72. Name of authorised signatory 1 (on behalf of Applicant Organisation) *

73. Date *



Format: M/d/yyyy

74. Name of authorised signatory 2 (on behalf of Applicant Organisation) *

75. Date *



Format: M/d/yyyy

PLEASE NOTE - THE DEADLINE FOR APPLICATIONS IS 4PM FRIDAY 22nd
JANUARY 2021.

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