

Fill Comed Time 41.18/19

Clerk to the Council/RFO: Caroline Higgins

Chairman: Cllr Keith Keel

Parish Office Lyth Hill Road Bayston Hill Shrewsbury

Telephone/Fax: 01743 874651

E-mail: baystonhillparishcouncil.org.uk

GRANT APPLICATION

If you require a large print version of this form please ask the Parish Clerk

Each year the Parish Council has a small budget allocation available to give as grants to local organisations to help improve the well being of Bayston Hill residents.

Please use the guidance below to confirm your eligibility for a grant.

About you

- you can apply as an individual or an organisation
- you must live or work in the Parish of Bayston Hill or be very closely associated with the Parish.

Your idea for a grant must

- improve the well being of people in Bayston Hill
- support an aspect of the Bayston Hill Parish Plan. Copies of the Parish Plan are available from the Parish Office, the Library and can be downloaded from the web site.

Your application should be

- for a small sum of money a maximum of £500.
- if possible have some matching funding of between 25%-50%.
- for something that it might be difficult to find funding for from somewhere else

Help with your application

If you are thinking of making an application, please contact the Parish Clerk. If you do not meet all the criteria listed above it might still be possible to apply for a grant.

Number of grants to be awarded

The Council is hoping to award between three and six grants each year, subject to the limits of the fund.

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When you have finished your project

We shall expect you to spend the grant within 12 months and submit a short report and statement of accounts. The Parish Clerk will explain the format of the report and accounts to you.

If your grant award is not successful

We shall explain why your application was not successful and advise you about further applications.

Application Form

You can submit the form by hand or post to the Parish Office or by e-mail.

ABOUT YOUR ORGANISATION

1. Name of the organisation making the application:

Patients Participation Group - Bayston Hill Surgery

2. Address of the organisation:

The Beeches Surgery

3. Name and address of the contact person for this application. Please include the post code and telephone number:

Mr Terry Seston, Chairman – 78 Lansdowne Crescent, Bayston Hill Shrewsbury SY3 0JD – 01743 872 485

4. What kind of organisation is it? Please delete as appropriate.

Registered Charity - and provide the reference number Limited Company - and provide the company number Unregistered/informal organisation

Please attach a copy of your Constitution or formal documentation to this application. This is not required if you have submitted it with a previous application and there have not been any changes, or if you are applying as an individual or unregistered organisation

5 Briefly describe the aims of your organisation, the needs you seek to meet and the people you work with.

To help promote The Beeches Surgery and help with promoting health issues of men, women and children within the community of Bayston Hill Surgery area.

6. What area do the activities of your organisation cover? Please delete as appropriate.

Bayston Hill only Bayston Hill and other areas Areas other than Bayston Hill

7. How many people take an active part in your organisations or activities?

To help promote The Beeches and Dorrington Surgeries and help with promoting health issues of both men, women and children within the community of Bayston Hill Surgery area.

What proportion of these people come from Bayston Hill?

99%

8. Does your organisation employ any staff and if so – how many?

No staff are employed - all participants are Volunteers

THE REASON FOR YOUR GRANT APPLICATION

9. Explain why you need a grant, who will benefit from it and how.

Our grant request if for the PPG to provide a Water Machine to be placed in the waiting room of the surgery at The Beeches Surgery. We believe that his would be beneficial to patients attending the surgery whilst they are waiting to be seen by the Doctor/Nurse. This we believe would not only be useful at all times but especially in Summer months when the waiting room can be hot and stuffy

10. Explain how this grant will assist the Parish Council in achieving the Parish plan.

It is important that good health and welfare in the village for both young and old is encouraged. This grant would enable us to purchase a healthy facility to be used by residents of Bayston Hill when attending the surgery. The Parish Council would be assisting in one of its aims as the surgery has between 3,000 and 4,000 registered patients in Bayston Hill.

11. What is the total budget for your grant? Please give a breakdown of costs.

The cost of a new Machine would be approximately £194

What percentage of the overall budget are you requesting from the Parish Council?

100% would be most welcome as we don't have many opportunities to raise money

13. Have you applied to any other organisation to fund this grant? If yes, please give details. No

PREVIOUS EXPERIENCE OF MANAGING GRANTS

14. Have you received grant funding from any organisation in the past? If yes, please give details.

No

SUBMITTING YOUR APPLICATION

15. You should sign that you agree with the following statement

I am authorised to apply for this grant on behalf of the organisation named above, and to the best of my knowledge the information included in the form is correct

Signature:	a.	D. Deston	 Name: .	T.W. SESTON	• • • •
Date: 9.c	TONE	2018			

Please submit the following documents with your application.

- A copy of your constitution or document of rules if you have them
- The name and address of the Chair person of your organisation
- Your most recent annual statement of accounts