**Feasibility Grant Application Form**

An Roth Community Enterprise Centre

Craignure, Isle of Mull, PA65 6AY

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**For applications up to £10,000**

This fund was set up to support projects which, once fully evaluated should provide a clear benefit to the local communities of Mull and Iona. Funding of up to £10,000 is available for projects that need professional evaluation, for example feasibility study or business planning. Feasibility grant applications may be subject to an interview with the Trustees. Successful applicants must complete reporting forms post funding and provide proof of purchases with receipts and a breakdown of spending. Each application will be reviewed on an individual basis.

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| 1. About your group |
| **1.1 Name of your organisation**e.g. the name of your building, charity, group or organisation. |  |
| **1.2 Type of organisation** e.g. Registered charity, school, charitable trust, community council, constituted sports club, church etc.  |  |
| **1.3 Name of key contact**The key contact should be fully aware of the project and prepared to answer any questions that the Trustees might have. |  |
| **1.4 Email address**Please make sure the email address provided is regularly checked and monitored. |  |
| **1.5 Daytime telephone number**You can provide us with a home telephone number of the key contact, a mobile number or both. |  |
| **1.6 Website**Website for the organisation or project |  |
| **1.7 Postal address for printed correspondence**Contact address for all important documents that cannot be emailed |  |

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| 2. About your project |
| **2.1 Name of the project**This should be the specific name of the project you are looking to be funded, rather than the name of the organisation that is hosting the project. Something short and memorable works best. |  |
| **2.2 Tell us about your project, and what you intend to use the grant for?**If possible, please link this to our funding priorities:Affordable housing, youth, business and economic development, cultural heritage and arts, spiritual mental and physical wellbeing, community care and activities, energy efficiency and renewable energy. Here you should give the background of your organisation and project. We would like to know about the people involved and what you would like to do. Your activities should be measurable so that you can measure how successful your project has been. |  |
| **2.3 How will your project make a change** The Waterfall Fund is here to make a **real difference** to people on the island, please give as many details as you can, on what real differences your project, once developed will deliver. |  |
| **2.4 How will this funding enable your project to flourish in the long term?** The Waterfall Fund Feasibility grant is there to enable applicants to determine whether projects are suitable to take forwards and to support subsequent applications for funding. If the feasibility of the project is proven, how will you then proceed |  |
| **2.5 Why is there a need for the project?** What is the need that you have identified?Please provide details.You should use this section to explain what problem or opportunity this project overcomes or addresses. We cannot support projects which duplicate or displace other similar projects or existing businesses, we want to support projects that support the community |  |
| **2.6 How many people will benefit from the project, and where will they be located?** We will only support projects that benefit Mull, Iona, Ulva, Gometra, Erraid, Inch Kenneth or Calve Island. We would like to fund projects which have both wide reaching benefits to the residents of the islands, or have a specific targeted group e.g. the children, the elderly, disabled etc. |  |
| **2.7 What support do you have from other groups and stakeholders?** We are interested in supporting groups whose projects are supported by other groups and stakeholders such as schools, the NHS, Argyll and Bute Council etc. |  |
| **2.8 What is the expected time frame of your project?**Please note your project must commence within 6 months of the start date and the grant should be spent within 12 months. A report is also required detailing how the grant was spent within 12 months | Start Date |

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| 3. Funding your project |
| **3.1 Are you a registered, constituted charity?**This could be a charity, SCIO, community interest company. | ☐ Yes☐ No |
| **3.2 Does the organisation have its own bank account?** This is really important. We won’t pay funds into personal or private business bank accounts | ☐ Yes ☐ No |
| **3.3 Please provide your bank account details** | Account name |  |
| Account number |  |
| Sort Code |  |
| **3.4 Is your organisation VAT registered?** | ☐ Yes, VAT reg no – ☐ No |
| **3.5 When did your organisation start?**If you don’t know exactly, just put the month and year.  |  |
| **3.6 Are there any restrictions on who can join your organisation?** We need to ensure that the grants are as inclusive as possible. However there may be a good reason why some might be excluded, we just need to know why. | ☐ Yes,☐ NoIf “yes” what are they and why are they necessary? |
| **3.7 Have you received any other funding for this project?** We will fund up to 100% but preference will be given to projects which seek to use the Waterfall Fund to leverage match funding from other sources including local fundraising. |  |
| **3.8 What is the alternative option if this funding bid is unsuccessful?**We encourage projects to apply for other funding options and not rely solely on the Waterfall Fund |  |
| **3.9 How does your project plan to sustain itself in the future?** Preference will be given to projects which can demonstrate financial sustainability. |  |

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| 4. Cost Breakdown of project funding requirement |
| You should have a detailed plan for what you are planning to spend the funding on, which you should include here. Post funding, you will need to provide evidence for what you have spent money on with receipts on the reporting form. |

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| **Item** | **Total Cost (£)** | **Amount from us (£)** | **Preferred Supplier** |
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| **TOTAL** |  |  |  |

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| **5. Declaration** |
| The application form should be signed by the most appropriate person. It may be the person named in section 1, or it may be someone else. For a group, business or organisation it should be the chairperson, chief executive or owner. In the case of an individual applicant it should be the individual themselves.I certify that the information contained in this application is correct, and that I am authorised to make the application on behalf of the above group. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

All applications should be submitted electronically to admin@thewaterfallfund.co.uk

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| **Please feel free to use this optional space if there is anything else you wish to tell us about your application:** |