



Grant Application Form, England

Bike Club's grant programme has been established to give financial support to organisations and young people who are developing and running cycling projects and activities.

Before completing this application form, please read the 'Guidelines' document and the 'Terms and conditions' document. Both can be downloaded from bikeclub.org.uk or you can request a copy by phoning 0844 736 8464 or emailing info@bikeclub.org.uk.

Bike Club has development officers across the country, who are able to give advice and support in completing this application form. You can find out who your local officer is by visiting bikeclub.org.uk or by phoning 0844 736 8464.



Section A – This section provides us with details about your organisation (see the ‘Guidelines’).

Your organisation

Name of group or organisation

Address

Postcode

Landline number

Website (if applicable)

Name of lead applicant

Position held in group/organisation

Email address of applicant

Phone number of applicant

If lead applicant is under 18 years of age, please provide details of an adult supporting the project.

Name of worker/leader

Position held in group or organisation

*Please tell us about your group or organisation (150 words).

What type of group/organisation are you?

Voluntary Extended service Statutory Private business

Registered charity – please give your charity number:

*Do you have any volunteers supporting your project? Yes No

If so, how many volunteer hours per week are given?

Name of organisation’s bank account

If your application is successful, we will need full bank account details later.

Do you have a constitution or other governing document?

Yes No

If successful with your application we may request to see a copy.

Do you have a child protection policy or safeguarding children policy?

Yes No

If successful with your application we may request to see a copy.

Have staff and volunteers undertaken an enhanced CRB checks in the last three years?

Yes No

If no please tell us why not:

*Do you have public liability insurance?

Yes No

*Do you have employer liability insurance?

Yes No

* See the ‘Guidelines’.

Section B – This section provides us with details about your Bike Club.

***The activity**

Please tell us why you are applying for a Bike Club grant (500 words). Give us as much detail as possible about the activity that will be funded by Bike Club.

What type of cycling activity will your young people be undertaking as part of the Bike Club? Please tick as appropriate:

- Maintenance Bikeability Arts project Media project
- On-road riding Mountain biking BMX Led rides
- Accessible cycling (adapted bikes) Expedition/Trip Young volunteers
- Youth Campaigning Event Other, please state:

Please indicate, by ticking the appropriate boxes below, whether your Bike Club will be working specifically with any of our target communities.

- Young people aged 10 to 20 excluded from mainstream education
- Young people aged 10 to 20 at risk of offending
- Young people aged 10 to 20 not in education, employment or training (NEET)
- 10 to 20 year olds with their families

* See the 'Guidelines'.

Young leaders

Young people aged 10 to 20 who traditionally have low levels of cycling, such as:

- girls and young women
- older teenagers
- young disabled people
- young people from black and ethnic minority (BME) communities
- young people living within deprived communities.

*How many children and young people will be part of the project during its first year?

*What age are the children and young people?

*What percentage of Bike Club participants will be young disabled people ?

*What percentage of Bike Club participants will be BME children/young people?

How will you actively promote your Bike Club to young disabled people and BME young people and engage them in Bike Club activities?

*Is this a single gender project?

Yes

No

*If yes, who are you working with?

If a mixed project, how will it engage girls and/or young women?

* See the 'Guidelines'.

*Have children/young people taken part in the planning of this activity? If so how?

*Would you like support in delivering the Youth Achievement Awards to your young people to enable them to gain accreditation and recognition for the Bike Club activities?

Yes

No

If no, please provide a reason.

Where will the activity take place?

How often will it take place? (eg every Saturday for six weeks)

When will the activity start (date)?

How long will the activity run for (weeks/months etc)?

*How do you plan to sustain this activity if it is an ongoing project?

*How do you plan to evaluate the success of this activity? What evidence will you collect to help with your evaluation?

* See the 'Guidelines'.

Will you be working with other organisations/partners on this activity? Please describe who and how they are involved.

*Please tell us what you have done to address the health and safety of the children/young people participating in this activity.

***Activity budget**

Total cost of your Bike Club activity (A):

How much are you requesting from Bike Club? (B)

How will you raise the remainder? (This could be given in kind, eg volunteer time.)

When do you expect to have raised this by?

Please use the table below/on the next page to list all costs requested from Bike Club. (Please be as specific as possible, for example, if you are asking for cycle instructor fees please give cost per hour.)

* See the 'Guidelines'.

Please include **all** items – ones that must be paid for (such as equipment, bikes, training, storage) and ones that are received in kind (such as venue, youth worker staff resource). Please note that volunteer time does not need to be included.

Item (eg venue hire, volunteer expenses, bike mechanic). Use headings that best describe the activity.	Cost – even if item is being donated ‘in kind’, please estimate its value here.	Amount sought through Bike Club funding	Amount to be funded from other sources	Non-Bike Club source (eg Awards for All, Youth Opportunity Fund, own funding, local authority). Please indicate here if ‘in kind’ funding.	Outcome of other funding application or date result is due
<i>eg storage container</i>	<i>eg £2,000</i>	<i>eg £1,225</i>	<i>eg £775</i>	<i>eg Council youth fund</i>	<i>eg Decision expected late Feb</i>
Total					
	Total project cost (A)	Total of Bike Club application (B)	Total of funding from other sources (C)		

Continue this table on the next page if necessary.

References

Please provide contact details for two referees (one of whom must be external to your organisation). We will contact referees during the assessment period.

Name: _____

Name: _____

Organisation: _____

Organisation: _____

Address: _____

Address: _____

Postcode: _____

Postcode: _____

Daytime number: _____

Daytime number: _____

Evening number: _____

Evening number: _____

Email address: _____

Email address: _____

For monitoring purposes only – has your Bike Club development officer supported you in completing this application form?

Yes

No

Bike Club development officer's name: _____

I am authorised to make this application on behalf of this organisation. I confirm that the information provided on this form is accurate and that this organisation agrees to the 'Terms and conditions' of the Bike Club grant programme. I understand that if we are unable to supply further information as required, this application will be rejected. If the information in this application or in the documents being sent with this application changes in any way, I will inform Bike Club immediately.

Signature of applicant (or lead worker if applicant is under 18 years):

Date: _____

Signature of director/lead of organisation:

Position: _____ Date: _____

An electronic copy of this form should be sent to your local Bike Club Officer by the advertised deadlines (see the 'Guidelines' or bikeclub.org.uk).

A printed copy of this form, with signatures, must also be sent to: Bike Club Applications, c/o Becky Wyatt-Dawson, Avon Tyrrell Activity Centre, UK Youth, Bransgore, Hampshire BH23 8EE.