**Southend-on-Sea City Council’s Children’s Short Breaks**

**Main Grant**

**Application Form**

Please read the [Main Grant guidance 2025/26](https://www.livewellsouthend.com/respite-families-short-breaks/southend-sea-city-councils-childrens-short-breaks-statement-202526) before completing this form. **Please use Arial 12pt font to complete this application.**

If you need help with the questions on this form, contact Southend-on-Sea Short Breaks: mailto:shortbreaks@southend.gov.uk

**Contact information**

1. **Contact details of organisation/applicant**

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| --- |
| **Organisation:** |

|  |
| --- |
| **Applicant’s Name:** |
| **Position:**  |
| **Adress:** |
| **Postcode:** |
| **Website:** |
| **Email address:** |

1. **The main contact person for this application**

|  |
| --- |
| **Name:** |
| **Position in organisation:** |
| **Contact address:** |
| **Postcode:** |
| **Telephone number:** |
| **Email address:** |

**Organisation Information**

**3. How would you describe the organisation (if applicable)?**

**Please tick boxes that apply to the organisation or applicant**

Registered charity Charity Number ………………………………..

Voluntary or Community Self help group/forum

Social Enterprise

Childcare provider Ofsted Registration No. if applicable

Company Limited by guarantee

Individual or Other

|  |
| --- |
|  **Please clarify or state if individual**  |

**4. Information about your organisation**

If you are part of a larger organisation or have an umbrella group, please state the name of this organisation:

|  |
| --- |
| **Name of larger/umbrella organisation:** |

**5. What are the stated aims and objectives of your organisation? This should be based on the governance documents. (Maximum 500 words).**

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**Project/Service/Activity/ Information**

**6. What is the title of your project/service/activity?**

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**7. Please give a short summary of your project/service/activity to which this application relates. (Maximum 200 words).**

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| **What is the service/project/activity?** **Who is the service/project/activity being delivered to?****How many disabled children will benefit from this service/project/activity?** |

**8. Please describe the intended outcomes and how the qualifying children, their families and or/carers will benefit.**

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**9. How will you involve users/participants in the development of your project/service/activity? How will you seek their feedback? (Maximum 100 words)**

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**10. In relation to your project/service/activity, please answer the following:**

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| --- |
| **Date from: Or is it ongoing?****Date to:** |
| **Venue(s)/Location (if applicable)** |
| **Frequency**  |
| **Expected number of children to benefit:** |

**Financial Information**

**11. Financial Reserves**

Please give details about the level of the free reserves (unrestricted and undesignated funds) held by your organisation - both the total amount and also the amount in terms of number of months running costs.

Free Reserves Held:

£

Please state the amount of funds held by your organisation which could be used for this project/service:

£

 Number of months running costs equates to:

**12. Is your proposal:** (please tick)

a) To provide continuity of an existing service

b) Development of existing service

1. New service/activity

 d) Exisiting service targeting a new group

of children/young people

**13. Please give details of how much you will be asking participants to pay to attend each project/service/activity**. ***(Note: disabled particpants are expected to pay the standard amount but no more).***

The figure to enter here is **the amount each parent pays for their child to attend each session** (**NOT** the total amout of income expected).

|  |
| --- |
| **Project/Service/Activity** |
| £ |

**14. Please complete the budget table below to provide a breakdown of the funding requested for each service you are proposing. Give details of any additional costs which will enable you to meet the speciific requirements of children and young people with disabiliteies who will be attending.**

**Activity/Project /Service**

|  |  |
| --- | --- |
| **Description** | **Cost/£** |
| **Staff costs – please give details** |
|  |  |
|  |  |
| **Resource costs – please list details of equipment to be purchased**  |
|  |  |
|  |  |
|  |  |
| **Training costs – please list** |
|  |  |
|  |  |
|  |  |
| **Other costs – please give details (can include financial assistance for lower income families)** |
|  |  |
|  |  |
| **A: Total costs:** |  |
| **B: Total income from Parental Contribution/Charge** |  |
| **C: Any other income** |  |
| **D: Total Income (B+C)** |  |
| **E: Shortfall: Costs (A) minus all income (D)** |  |
| **F: Total funding requested in this application**  |  |

**15. Is your project/service/activity sustainable long term?**

**Yes** **No**

 **If you have answered Yes, please go to Question 16**

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| **If you answered No, what will you plan to do when the project/service/activity funding ends to keep it running?**  |

**16. What will happen to the project/service/activity when the grant is spent? (*Please indicate if it is for a ‘one off’ event).***

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**17. What would happen if your application was only partially awarded or unsuccessful?**

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**Previous Funding Applications**

**18. Have you applied to Southend-on-Sea City Council for a grant for this project or any other grant within the last 5 years?**

 **Yes**   **No**

**If Yes**, please give details of who was applied to, what the grant was for and what amount was received.

|  |  |  |
| --- | --- | --- |
| **Date** | **Detail** | **Amount** |
|  |  |  |

**Present Funding Applications**

 **19. Please tick yes if you are making multiple applications for the same project/service/activity.**

 **Yes** **No**

**20. Please list any other source of funding being sought, or that have been secured in the last 5 years, for the application of the project/service/activity.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Funding sources** | **Applied** | **Confirmed** | **Amount** **£** |
|  |  |  |  |

**Document Information**

**21. Documentation**

Please tick to confirm whether you have the following documentation and state the amount of cover

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | Public Liability insurance |  | Amount of cover |  |
|   |  Employers Liability Insurance |  | Amount of cover |  |
|   | Indemnity Insurance |  | Amount of cover |  |
|   | Adults Safeguarding Policy |   | Safeguarding Children and Young |  |
|   | People Policy |   | Recruitment Policy |  |
|   | Health and Safety Policy |   | Staff Training |  |
|   | Equality and Diversity Policy |   | Constitution |  |
|   | Vehicle insurance |  |  |  |

 **Equality and Diversity**

**22. Please outline how your project will contribute towards:**

1. The elimination of unlawful discrimination
2. The advancement of equality of opportunity for everyone, including those having a protected characteristic
3. The fostering of good relations between all, including those having a protected characteristic
4. Will any groups of people be specifically excluded from benefitting from this project/service/activity?

If so, please confirm the restriction and why you intend to impose it.

**Protected characteristics** are those defined in the Equalities Act 2010, namely race (including ethnic or national origins, colour or nationality), age, disability, gender, religion or belief and sexual orientation.

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**Privacy Notice**

**Who are we?**

Southend-on- Sea City Council is the data controller for personal information and follows all applicable data protection legislation (including the DPA 2018 and the GDPR) when processing personal data. Any information held by the council will be processed in compliance with these laws. We may not be able to process your application if you do not provide all the requested information.

Under Central Government’s Open Data agenda, if your application is successful, details of grants of £500 and over can be published on Southend City Council’s website. No personal information will be published.

**Why do we need this information?**

The information you have supplied in this form will be used to process your grant application.

**Keeping your information secure**

We will take all necessary steps to protect your information and will not disclose it unless obliged to do so by statute, regulation, or other legally binding authority.

**Who do we share this with?**

In order to make a decision on your application, some anonymised information provided may go into a public decision report. In addition, your application form may be shared with third parties and partner agencies who will be involved in the decision making process or who can verify specific facts within your application.

We may be required to disclose information outside the Council under legal obligation, such as to aid a criminal investigation; additionally, we may disclose information to help prevent fraud.

**How we will be store and dispose of your information**

Information contained in this application or submitted in support of the application will be stored on a database and will be available to all departments of the Council. Submitting this form indicates that your organisation consents to the sharing of this information with Southend Council and for the purposes of this grant.

**Data subject rights and contact information**

If you have a question about the information covered in this privacy notice you can email the Data Protection officer at dataprotection@southend.gov.uk. For further information on how the Council uses information and data subject rights please visit [www.southend.gov.uk/privacynotice](http://www.southend.gov.uk/privacynotice).

For independent advice about data protection, privacy and data sharing issues, or to lodge a complaint about how we have handled information, you can contact the Information Commissioner’s Office (ICO): You can visit [www.ico.org.uk](http://www.ico.org.uk) or email casework@ico.org.uk

 **Declaration**

I am authorised to apply for the grant set out in this application

I confirm the following:

* I will inform Southend-on-Sea City Council if any of the particulars and information given cease to be correct;
* I will only use the grant awarded to access activities as specified in my application;
* I agree to return all unspent monies to Southend-on-Sea City Council at the end of the award period. I understand that, if I fail to do so, it will affect any future applications I may wish to make, and Southend-on-Sea City Council may pursue the return of unaccounted monies;
* I understand that if the grant is used for any purpose other than as agreed in the application, this may impact on any future applications that I may wish to make and Southend-on-Sea City Council may request the funds to be returned;
* I agree to give Southend-on-Sea City Council receipts to show how the money has been spent and how the outcomes were met. If this is not done it will affect future funding applications;
* If requested, I agree to complete a short questionnaire to contribute to the ongoing monitoring of the Short Break Grant scheme;
* I understand that the grant I am applying for, is for this year only (2025/26), with no expectation of funding in future years;
* I understand that I am responsible for ensuring the safety and welfare of my child during any Short Break, funded through this grant;
* I understand that any payments made for staffing will adhere to UK taxation laws.

I agree to the Declaration and Privacy Notice above:

|  |
| --- |
| Name…………………………………………………………..Position ………………………………………………………..Signature………………………………………………………. |

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|  |

 Date

Second signature from a member of the organisation

|  |
| --- |
| Name…………………………………………………………..Position ………………………………………………………..Signature………………………………………………………. |

|  |
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|  |

 Date

**Relevant Documentation for Successful Applicants**

**All relevant documentation must be available for viewing within 2 weeks of decision date:**

|  |
| --- |
| 1. **A copy of your Public Liability insurance document**
2. **A signed copy of your Constitution**
3. **A copy of your Equal Opportunity Policy**
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| **Completed application should be submitted to:** [**shortbreaks@southend.gov.uk**](file:///C%3A%5CUsers%5Colivia%20allen%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5COCBKY75J%5Cshortbreaks%40southend.gov.uk) |

**Applications must be completed in full and returned by midnight on the closing date**

**Please keep a copy of this application form for your own reference**

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| --- |
| **Opening Date Closing date for application****14 April 2025 18 May 2025 by midnight** |

**What Happens next?**

Applications need to be returned to Southend on Sea City Council.

When applications are received, initially they will be checked to make sure that the application is eligible to be submitted for funding. This is the screening stage of the bid.

If an application does not appear to be eligible for funding, a letter will be sent, explaining why the application is not eligible. Organisations will be able to appeal against a ‘screening’ decision by submitting, in writing, within 10 days of receipt of our letter, evidence that proves they are eligible to be submitted for funding.

Once an application has been successfully screened, it will then be scored so that applications can be given a priority, it is felt that more information can help with a decision, you may be asked to supply this information before a final decision can be made.

Decisions on successful applications will be made and we will notify all applicants, by letter following these decisions.

**Summary Sheet**

**(To be completed by all applicants)**

|  |  |
| --- | --- |
| **Name of Organisation** |  |
| **Date** |  |
| **Amount applied for** | **£** |

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| **Are you currently receiving funding from Southend-on-Sea City Council** |  |  |

**Where does your organisation work?**

|  |  |
| --- | --- |
|  | **Please tick** |
| **Nationally** |  |
| **Essex** |  |
| **All of Southend-on-Sea City Council** |  |
| **Parts of Southend-on-Sea please list** |  |