**SNG #iwill Fund 2.0**

**Wellbeing Champions Programme**

**Application Form**

**Thank you for your interest in applying for funding through the SNG #iwill Fund.**

**Please submit this completed application form and supporting documents via email by the deadline midnight 09/10/2024 to:**

**iwillfund-applications@sng.org.uk**

**Further Information:**

Please make sure you have read our Information Pack for information on the Wellbeing Champions Programme, our eligibility criteria and dates of information and drop-in sessions.

**Privacy Notice:**

By completing this application form, you are explicitly providing consent for SNG to use your personal data and the personal data of other named individuals in your application. Your application form and supporting documentation will be shared with members of the awarding panel.

Your details may also need to be shared with The National Lottery Community Fund, #iwill funders and other #iwill Match Funders (names of Match Funders can be found at [www.tnlcommunityfund.org.uk/funding/programmes/iwill-fund](http://www.tnlcommunityfund.org.uk/funding/programmes/iwill-fund)).

If you would like to know how SNG will process your personal data, please visit <https://www.sng.org.uk/privacy-policy>

**Alternative Formats:**

We are committed to equality of opportunities in relation to funding and feel that a diverse portfolio of projects allows for more learning and in turn, improvement of practice.

We want everyone who is eligible to be able to apply for the SNG #iwill Fund and we are committed to our funding being as accessible as possible, wherever we can.

If you would prefer to apply verbally, or through different means then please contact us by emailing iwillfund-applications@sng.org.uk

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| **SECTION 1: ORGANISATION INFORMATION**  |
| **Have you read the WCP Information Pack?***We’d recommend reading this before completing your application.* |  |
| **Legal name of organisation** |  |
| **Trading name of organisation – If different to legal name** |  |
| **Type of Organisation***Please make sure you have read the eligibility criteria to ensure that your organisation is eligible.*  | ​**Highlight from the below:**Registered Charity ​​Constituted community group Social enterprise Community Interest Company Public body at local level School Parish Council Housing Association Other (Please Specify) - |
| **Charity Registration Number (If Applicable)** |  |
| **Companies House Number (If Applicable)** |  |
| **Organisation income per annum** |  |
| **Organisation full postal address** |  |
| **Project lead(s)** |  |
| **Role of project lead(s)** |  |
| **Tel/ Mob of project lead(s)** |  |
| **Email of project lead(s)** |  |
| **Organisation opening hours** |  |
| **Project lead(s) working hours** |  |
| **Does the leadership of the organisation****Self-identify as having lived experience in the following:** | **Highlight for ‘Yes’ to having lived experience:**Communities facing racial inequality Faith communitiesMigrantsEducationally/Economically disadvantagedDisabled peopleLGBTQ+ peopleOlder and younger peopleCommunity backgroundWomen and Girls |
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| **SECTION 2: CONFLICTS OF INTEREST** |
| **How did you find out about the SNG #iwill Fund?** |  |
| **Are you a resident of Sovereign Network Group?** (Formerly Sovereign Housing Association and Network Homes) | Yes / No |
| **Do you have a close relationship with any current Board member or employee of Sovereign Network Group?** | Yes / No**If yes, please name the board member or employee and state the nature of the relationship:** |
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| **SECTION 3: FUNDING DECLARATION**  |
| **In the last 3 years, have you been awarded £332k or more of public funding?**N.B. If yes, you may not be eligible for this fund | Yes / No |
| **Are you currently in receipt of #iwill funding?**From either SNG (Formerly Sovereign Housing Association and Network Homes) or any other organisation | Yes / No**If yes, please answer the below:**Amount Awarded – Organisation Awarded From – Project End Date – Spend and Monitoring/ Evaluation Cut Off Date –  |
| **Have you been previously awarded funding from SNG?** (Formerly Sovereign Housing Association and Network Homes) | Yes / No**If yes, please let us know:*** List each individual grant you’ve received from us
* The amount awarded for each grant
* The project/ contract dates for each grant
* Status of each grant (e.g. finished or ongoing)
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| **SECTION 4: DUE DILIGENCE DOCUMENTATION CHECKLIST**  |
| **Please confirm that you will be able to send the following supporting documents along with your application form for us to complete due diligence checks.** |
| **A copy of your constitution/governing document.** e.g., constitution, memorandum & articles or set of rules  | Yes / No**If no, please give your reasoning:** |
| **A copy of a recent bank statement no more than 3 months old.** The bank account must be in the name of the organisation applying. | Yes / No**If no, please give your reasoning:** |
| **A copy of your latest annual accounts, or in the case of new groups, please send a financial forecast or budget for your first year, if you have one** | Yes / No**If no, please give your reasoning:** |
| **Your Safeguarding policy and Equality Opportunity policy.**  | Yes / No**If no, please give your reasoning:** |
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| **SECTION 5: PROJECT DETAILS**  |
| **Project Name** |  |
| **Brief summary of project** |  |
| **Details of the project and its delivery** |  |
| **Timescale of project**N.B. The project will start 01/02/25 and will end 01/11/25.Within this time period you are required to:* Plan and set up the project
* Engage young people
* Deliver the project
* Evaluate and reflect
* Report back to SNG
 | Month by month, if needed:Start 01/02/25Feb - Mar - Apr - May - Jun - Jul - Aug - Sep - Oct - End 01/11/25 |
| **What localities will your project cover***We will be looking to fund projects based near where we have SNG homes. Please see information pack for specific areas where we have stock.* | **Highlight area(s) covered:**1 - Oxford2 - Newbury & Reading3 - North Hampshire & Surrey4 - South Hampshire5 - Isle of Wight6 - BCP7 - Dorset8 - Devon9 - Bristol & Gloucester10 - Wiltshire11 - London12 - Hertfordshire |
| **Project Address – Where will you be engaging young people?***If your project if focused in a general area, rather than specific place, please also provide us with the postcodes of the areas covered.* |  |
| **Does your project target a specific group?** | **Highlight if Yes:**Communities facing racial inequalityFaith communitiesMigrantsEducationally/Economically disadvantagedDisabled peopleLGBTQ+ peopleOlder and younger peopleCommunity backgroundWomen and GirlsOther, Please specify -  |
| **What age of young people will your project target?***The SNG #iwill Fund will only fund projects targeting young people between 10-20 years old.*  |  |
| **How many young people will engage in social action through the project?**Please give a numerical answer.For the SNG #iwill Fund, we ask that you engage at least 15 young people as Wellbeing Champions. |  |
| **What is your main objective(s) for the project and how does this link with the aims of the SNG #iwill Fund?** *You can find the SNG #iwill Fund Aims in the Information Pack.* |  |
| **Please confirm that your project will create NEW opportunities for youth social action**  | Yes / No  |
| **What is the main type of youth social action your project will offer young people to take part in?** | **Select ONE of the below. If you have more than one, chose the main one:**Fundraising Campaigning Helping to improve local area Supporting people other than friends or relatives Tutoring, coaching or mentoring Volunteering Youth Advisory Work Other, please specify –  |
| **If your project will also offer other youth social action opportunities, please let us know.** | **Highlight any of the below is offered:**Fundraising Campaigning Helping to improve local area Supporting people other than friends or relatives Tutoring, coaching or mentoring Volunteering Youth Advisory Work Other, please specify –  |
| **How does your project link to the six principles of high-quality youth social action below?**1. Be youth-led
2. Be challenging
3. Have social impact
4. Allow progression to other opportunities
5. Be embedded in a young person’s life
6. Enable reflection about the value of the activity.
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| **How will you target and recruit young people onto your project?** |  |
| **How will you ensure young people are retained throughout the delivery of the project?** |  |
| **How will young people engaging in the project be equipped with the skills to engage in youth social action?**e.g. will you offer any training for the young people and if so, who will provide this training? |  |
| **How will your project be managed?**Please detail any training you will offer to youth workers/facilitators as part of the project. |  |
| **How often will youth workers/facilitators meet with young people?** |  |
| **How do you plan to evaluate your project?**You will also be required to report on the impact that your project has had on young people, the local community and your organisation. |  |
| **Will you be working in partnership with any other organisations to deliver the project?** | Yes / No**If Yes, please state who and describe the nature of the partnership -**  |
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| **SECTION 5: SPEND DETAILS**  |
| **How much funding are you requesting to deliver your project?**£10,000.00 maximum grant |  |
| **Does the requested amount cover the full project cost?** | Yes / No**If No, do you already have the funding for the rest of the project?** Yes/ No**If Yes, please detail where this funding has come from –** **If No, how do you plan to fund the rest of the project? –**  |
| **Please provide a breakdown of your project budget***If your project budget is over £10,000, please highlight which parts of the budget you are applying for funding from us for.**It would also be beneficial to have an outline of when the funds will be spent in relation to the project timeline.**Please note, the full grant needs to be spent by the project end date 01/11/25.* *Please see Information Pack for costs we cannot cover through this grant.*  |  |
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| **SECTION 6: ADDITIONAL INFORMATION**  |
| **Please provide us with a brief background of your organisation and why you want to take part in this project.** |  |
| **What experience do you have with delivering youth social action projects?** |  |
| **What experience do you have with delivering training and/or support for young people with regards to mental health and wellbeing?** |  |
| **Do you already have strong ties in the area you plan to deliver this project in?** | Yes / No **If Yes, please give us a brief summary of how you are connected with the community and young people within it.****If No, please tell us how you plan to connect with the local community and young people within it.**  |
| **Reporting Requirements:** **If successful with this funding –** 1. A representative from your organisation will be required to attend a 2-hour online Train-The-Trainer session in Mid-January 2025.
2. You will be required to provide brief update reports at the ends of months 3 and 6 of the project as well as a detailed report at the end of the project in month 9.
3. You will need to attend 3 review meetings with SNG to discuss project updates and submitted reports.
4. You will need to complete our photo consent forms for any photos you provide us with.
5. You will need to provide us with at least 2 impactful case studies.
 | **Please confirm that you will be able to carry out the reporting requirements for this project.** Please factor in some administration time into your budget if necessary.  |
| **Is there anything you would like to add to support your application?** |  |
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**Submission Date:** XX/XX/XX

**Please submit your application along with the supporting documents, as detailed in Section 5, via email by 09/10/2024 to:**

**iwillfund-applications@sng.org.uk**