



READ ONLY VERSION

All applications must be made through the online application form on our website, however you may find this read only version helpful as it shows all of the information you will need to complete the online form.

To ensure smooth handling of your application please ensure you complete all fields and provide the information requested. Please note that fields marked with an asterisk * **are mandatory**.

CONTACT INFORMATION



Primary contact for the application
This should be the person for all correspondence relating to this application, including notification of the outcome

* Role in organisation	* Name
<input type="text" value="Job Title"/>	<input type="text" value="Name"/>
* Address	* Town / City
<input type="text" value="Address"/>	<input type="text" value="Town / City"/>
* Postcode	* Contact e-mail
<input type="text" value="Postcode"/>	<input type="text" value="Contact e-mail"/>
* Contact Telephone	* Full legal name of your organisation (as shown on your governing document)
<input type="text" value="Contact Telephone"/>	<input type="text" value="Full legal name of organisation"/>
* Project Title	If your organisation uses a different trading name in its day-to-day activities, please enter it below.
<input type="text" value="Project Title"/>	<input type="text" value="Trading Name"/>



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ABOUT YOUR ORGANISATION



* Type of organisation:

- Registered Charity
 Non-profit Organisation

* Please enter all registration or reference numbers that apply.

Scottish Charity Regulator (OSCR)

Charity Registration Number

Charity Commission for England and Wales

Charity Registration Number

Charity Commission for Northern Ireland

Charity Registration Number

Companies House

Company Registration Number

Other (please also outline what the registration or reference number is for)

Other Registration / Reference Number

Organisation's registered details

* Address

Address

* Town / City

Town / City

* Postcode

Postcode

* Telephone Number

Telephone Number

* Website

Website



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ABOUT YOUR ORGANISATION (CONTD)

Organisation's main office holders (as appropriate):

Chairperson

Secretary

CEO/Other

* I confirm that there are at least three unrelated people on the board of my organisation

* What is the main purpose of your organisation?
(Maximum of 1500 characters, approximately 200 words)

* Of your workforce, how many people do you employ?

* Of your workforce, how many people volunteer?

* Are you a membership organisation?

Yes

No

How many members do you have?

* When is your organisation's financial year end? (dd/mm)

* Is your organisation currently in receipt of funding from the ScottishPower Foundation?

Yes No



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ABOUT YOUR PROJECT



Primary contact for the project

This should be the person for all correspondence relating to the project throughout the year

* Role/title

Role / title

* Name

Name

* Business Address

Business address

* City

City

* Postcode

Postcode

* Email Address

Contact e-mail

* Telephone Number

Telephone number

* Which of the following aims of the ScottishPower Foundation will your project help to support?

(Please select one)

- The advancement of education
- The advancement of environmental protection or improvement
- The advancement of the arts, heritage, culture or science
- The prevention or relief of poverty and the relief of those in need by reason of disability or other disadvantage
- The advancement of citizenship and community development



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ABOUT YOUR PROJECT (CONTD)

* What are you seeking the funding for?

Please provide a brief description of the project for which you are seeking funding, clearly stating how the funding from the ScottishPower Foundation will be allocated

(Maximum of 5000 characters, approximately 700 words)

* Will your activity include building work or land development?

Yes No

Do you have planning consent and all other necessary consents in place?

Yes No Not Required

* Why is this work needed?

Please tell us why your organisation wants to carry out this project. For example: have you identified a gap? Is this something that people have told you they want in their area? Has previous experience shown you that this type of activity is successful? Please don't use this section to give general statistics about social and environmental issues.

(Maximum of 2500 characters, approximately 350 words)

* Where will your project be carried out? (Please tick all that apply)

- Scotland
- England
- Wales
- Northern Ireland
- UK Wide

* Project Timescales

Your project must commence during the funding year (2018) and be completed within 12 months

* Project commencement date (mm/2018)

* Project completion date (mm/yyyy)



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ABOUT YOUR PROJECT (CONTD)

* Does your project include a specific event or activity?

Yes No

* What is the event / activity called?

Name of event

* Event / activity commencement date

mm/yyyy

* Event / activity completion date

mm/yyyy

* Where is the event / activity to be held?

Location of event

* Project Costs

What is the total cost of this project?	£	<input type="text"/>
How much funding are you requesting from the ScottishPower Foundation?	£	<input type="text"/>
When would the funding from the ScottishPower Foundation be required? Please note funds can only be paid during the relevant funding year (2018) from February to November		Month <input type="text"/>

* How will any remaining funds be met? (Please tick all that apply)

- Not applicable (requesting 100% from the Foundation)
- Organisation's own reserves
- Funding from another organisation
- Other

Please note that you will be required to provide evidence that all other funding has been approved before your application can be considered by our Trustees



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ABOUT YOUR PROJECT (CONTD)

Project Plan

* Please provide a high-level overview of your project plan and key dates
(Maximum of 250 characters, approximately 35 words)

KEY MILESTONE	DATE (MM/YYYY)
Key Milestone	mm/yyyy
Key Milestone	mm/yyyy
Key Milestone	mm/yyyy
Key Milestone	mm/yyyy
Key Milestone	mm/yyyy
+ Add Milestone	

* What are the specific activities that you will deliver?
(Maximum of 250 characters, approximately 35 words)

Project Deliverable	
Project Deliverable	
Project Deliverable	
Project Deliverable	
Project Deliverable	
Project Deliverable	
+ Add Deliverable	



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OUTCOMES & IMPACT



* Which of the following outcomes do you expect to see for your organisation as a direct result of the project?
(Please tick all that apply)

- Improve existing or deliver new services
- Reach more people or spend more time with clients
- Improve management process
- Increase profile
- Take on more staff or volunteers

* Approximately how many people will benefit from the project?

* Directly

* Indirectly

* Where do your intended beneficiaries live? Please list up to five **full** post codes to indicate the main areas that will benefit from your project.

This helps us to understand where the funding will be making a difference.

- 1
- 2
- 3
- 4
- 5



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OUTCOMES & IMPACT (CONTD)

* Which of the following outcomes do you expect to see for the beneficiaries as a direct result of the project?
(Please tick all that apply)

- Experience a positive change in their behaviour or attitude
- Develop new skills or an increase in their personal effectiveness
- Experience a direct positive influence on their quality of life or wellbeing
- Secure a job

About Your Beneficiaries

This section helps us to understand who will benefit from the project. There are no correct answers to these questions, and we will not use this information to assess your application.

* Is your project targeted at a specific group of people who have protected characteristics as defined under the Equality Act?

(age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation)

- Yes No

* Does your project benefit people who:

have a disability? Yes No

are of a particular gender? Yes No

please indicate which. Male Female

identify with a gender differing to that assigned at birth? Yes No

identify as Lesbian, Gay or Bisexual? Yes No

are of a particular age group? Yes No

- please indicate which. (Please tick all that apply)
- 0-5 years
 - 6-12 years
 - 13-25 years
 - 26-64 years
 - 65+ years



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OUTCOMES & IMPACT (CONTD)

are of a particular religion or belief?

Yes

No

please indicate which. (Please tick all that apply)

- Christian
- Buddhist
- Hindu
- Muslim
- Sikh
- Jewish
- No religion
- Other

are from a particular ethnic background?

Yes

No

please indicate which. (Please tick all that apply)

White:

- Scottish/English/Welsh/Northern Irish/UK
- Irish
- Gypsy or Irish Traveller
- Other white background

Asian, Asian UK:

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other Asian background

Black/African/Carribbean/Black UK:

- Carribbean
- African
- Other Black background

Other ethnic group:

- Arab
- Other ethnic group



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OUTCOMES & IMPACT (CONTD)

Monitoring and Evaluation

* How will you monitor and evaluate the project so you know that it has been successful?

(Maximum of 2500 characters, approximately 350 words)

* How will you communicate /profile the success of your project to your key stakeholder groups and the wider community?


(Maximum of 2500 characters, approximately 350 words)

* Please upload a copy of your most recent Annual Report and Accounts, which should have been independently examined or audited:

(In pdf format, up to 10MB)

No file chosen

I declare that to the best of my knowledge and belief all the information I have given on this application form is true, accurate and correct. I understand and agree that any misrepresentation may invalidate my application.

 I'm not a robot 
reCAPTCHA
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SUBMIT FORM