

£eith Decides

local money for local projects by local people

**THE INFORMATION ON THIS PAGE WILL BE MADE AVAILABLE TO THE PUBLIC
INCLUDING ONLINE AND IN LIBRARIES.**

Name of your organisation / group

Tell us about your group (what do you do?). Max 100 words

Tell us about the project you would use the money for. Max 500 words

Describe your project in 50 words (this will be used in project publicity)

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Who will benefit from this project?

Where will the project happen?

Is there a start and end time? (If yes, give dates)

Start...../ Finish.....

How many people in Leith will benefit?

Is your group open to all? If not, please explain.

Is anyone else working with you on the project? If yes, tell us about this.

Do you need any special permission from anyone or insurance to carry out your project? (We may ask you for evidence of this)

Yes ☐

No ☐

Give us a breakdown of what each item will cost for the total cost of the project:

Have you got any money to put towards the project? If yes, tell us about this.

Item	£
Total	

From where	£
Total	

How much money are you applying for from Leith Decides?

Describe your project in 10 words



Please tick the TWO (2) symbols below which most closely describe your project.

Young Children & Families



Children



Teenagers / Young People



Older People



Social Events



History / Culture



Environment; Nature; Gardening



Sports / Play Activities



People with Disabilities



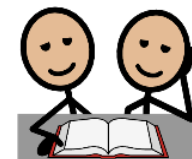
Women



Community



Training; New Skills



Health and Wellbeing



Art



Music/ Drama



Communications



Contact person:
Address and Post Code:
Telephone number:
Email address:

Please give details of your group's bank account: (account must be in name of group)

Name of bank	
Bank address	
Account name	
Bank sort code	
Account number	

DECLARATION AND SIGNATURES

All applications must be signed by two people who are recognised as representatives of your organisation. If you have a board/management committee one member of this should sign.

You are being asked to declare that;

- You will comply with all City Of Edinburgh Council funding conditions;
- To the best of your knowledge, the information contained in this application and any accompanying attachments is accurate.
- If you need help with becoming constituted, contact Jackie mearns, Community Learning and Development by e-mail to jackiemearns@ea.edin.sch.uk or phone 0131 554 4750.

HAVE YOU ENCLOSED?

- **A COPY OF YOUR GROUP'S CONSTITUTION.**
- **QUOTES FOR ANY ITEMS COSTING £200 OR MORE.**

Signature.....

Signature.....

Name.....

Name.....

Date.....

Date.....

Position.....

Position.....

Please return this form to: Loraine Duckworth | Leith Neighbourhood Partnership | c/o Leith Library, 28-30 Ferry Road, Edinburgh, EH6 6AE leith.decides@edinburgh.gov.uk

To be received no later than 5.00 pm, THURSDAY 25 AUGUST 2016

