Cartrefi Conwy

Community Chest Application Form 2025/2030

Complete your application form

Please attach any extra pages to your form and clearly label them.

If you prefer to fill in this form digitally, you can find it on our website www.carteficonwy.org
This application form is also available in Welsh.
Mae’r ffurflen gais hon hefyd ar gael yn Gymraeg.
If you need this form in any other language or format, please contact us.

Please read all the supporting guidance notes before you complete the application form to check that your project meets the criteria for funding.
If you need help or further information, please contact the Community Chest Team on: 07733 012528 or 0300 124 0040
or email: get.involved@cartreficonwy.org

DEADLINES



- **31st January**
- **30th April**
- **31st July**
- **31st October**

Please send your form and all supporting documents to
get.involved@cartreficonwy.org

Or, by post to;

The Creating Futures Team, Cartrefi Conwy, Morfa Gele, North Wales Business Park, Cae Eithin, Abergele, LL22 8LJ

1. GROUP/ORGANISATION DETAILS

Group/organisation name

Group/organisation address

What type of group/organisation are you?

Give a brief background about the group?

Have you had a Community Chest grant before? If yes, when was this and what was the project

2. CONTACT DETAILS

Name

Position in group/organisation

Address

Phone number

Email

Which language do you prefer to speak? **Welsh** ☐ **English** ☐

3. ABOUT YOUR PROJECT

Project title

_____

Project start date: **Project end date:**

_____

Geographical area to benefit from the project?

Description of project

How do you know this project is needed? (What evidence do you have?)

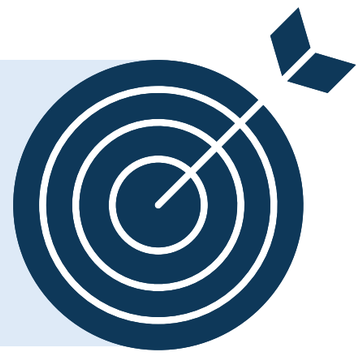
Does the project have the support of the community and/or Cartrefi Conwy tenants? (please provide letters of support and quotes from community)

How will Cartrefi Conwy tenants be involved in the project?

Who and how many people will benefit from the project?

How will you promote that Cartrefi Conwy has awarded you this funding?

4. THE IMPACT OF YOUR PROJECT



Which of these themes, described in the guidance, will your project meet? (please tick)

Communities ☐ **Culture** ☐ **Skills** ☐ **Environment** ☐ **Crisis Fund (£500 grant available)** ☐

How will your project meet each of the themes you have ticked?

Please share your project plan, including what you will do and how long each part will take.

5. PROJECT COST

Community Chest can fund projects up to £1,250 or may part fund the total amount.
Please list the costs as accurately as possible and send copies of estimates / quotes)

ITEAM OR ACTIVITY	TOTAL COST	AMOUNT REQUESTED FROM COMMUNITY CHEST
	£	£
	£	£
	£	£
	£	£
	£	£
	£	£
	£	£
	£	£
	£	£
TOTAL	£	£

Why can these costsnot be met by your current funds?What are you holding your bank balance/reserves for?

6. LANDSCAPING/BUILDING WORK

Does your project involve any work or improvements to a building you own or lease?

Yes ☐ **No** ☐

Does your project involve any work or improvements to land you own or lease?

Yes ☐ **No** ☐

Do you have public liability insurance? (please attach)

Yes ☐ **No** ☐

Will your project involve working with children?

Yes ☐ **No** ☐

Will your project involve working with vulnerable adults?

Yes ☐ **No** ☐

If yes, do you have a safeguarding policy? (Please attach it if you do.)

Yes ☐ **No** ☐

Will your project involve any activities that may require a risk assessment?
(For example: physical activities, building work, events, or any activity that could pose a safety risk.)

Yes ☐ **No** ☐

If yes, do you have a risk assessment for the project? (Please attach it if available.)

Yes ☐ **No** ☐

7. BANK DETAILS



Name of the bank or building society you hold an account with

_____

Your Account name (the group / organisation's name on your statements)

_____

Account number: **Sort code:**

_____

Please include a copy of your most recent bank statement which must be less than 3 months old. (Please note this must be a group bank account which requires two signatories to authorise payment)

DATA PROTECTION STATMENT

The information you provide on this form is required in order to assess whether or not a Community Chest grant can be awarded. The information will be only be shared with relevant individuals, and will be handled in line with the Data Protection Act 2018.

For more information on how we handle personal information, please see our Privacy Policy on our website - https://cartreficonwy.org/privacy-poli-cy/

AGREEMENT: TERMS AND CONDITIONS

If your application is successful and you are awarded a grant through the Community Chest fund, the group / organisation must:

- Give recognition to Cartrefi Conwy for the grant you have received.
- Invite the Community Chest panel to visit your project.
- Provide receipts/invoices for all purchases funded through the grant.
- Complete the project feedback form within 3 months of the project end date.

Any money paid to the group will become immediately repayable to Cartrefi Conwy if:

- The grant is not being used for the purpose set out in this application.
- There is a breach of the conditions set out in this guidance.
- False or untrue information is found to have been given in the application form,
- Requested feedback has not been provided to Cartrefi Conwy in the agreed time frame.
- The group or organisation stops operating/dissolves.

https://cartreficonwy.org/privacy-policy/

We have read and understand the terms and conditions of the Community Chest Fund and agree to meet the above conditions. ☐

We accept full responsibility and liability for the items purchased through the Community Chest grant, including any damage or incidents involving these items. ☐

Main Contact Signature and name

_____

Witness signature and name and role/connection to main applicant

8. CHECKLIST

Please read this checklist and make sure that you have completed each item and included the relevant documents before you submit the application.

1. You have answered all the questions in this application form.
2. Two unrelated people have signed the signature boxes.
3. You understand that if you make any serious misleading statements (whether deliberate or accidental) at any stage during the application process, or knowingly withhold any information, this could make your application invalid and you could be liable to repay any funds to us.

Please send the following documents:

1. Copy of the constitution of the organisation and / or a statement of the aims and objectives of the organisation
2. Letters and quotes to show community support for the project.
3. Most recent statement of accounts / bank statement(no older than 3 months).
4. Estimates and quotes for goods or services required for the project.
5. Copies of Liability insurance certificate(s) (if applicable)
6. Photo evidence/ maps of where environmental items will be placed (if applicable)
7. Photos of the community group/activities related to the project

PLEASE NOTE: if you do not provide the relevant documents, signatures or information, this will cause delays when processing your application form.

FOR OFFICE USE ONLY

Referenced number: **Date received:**

Has the application been approved?

Yes ☐ **No** ☐

If the application has been deferred, why?

What date was the decision made?

How much was awarded?

Community Chest Chairperson Signature:

Print name: **Signature:**

Signed on behalf of the Community Chest Panel:

Print name: **Signature:**
