**ADCH Minimum Standards**

**Grant Application Form**

**Autumn 2020**



**ADCH Minimum Standards Grant Programme**

This Programme has been designed to help ADCH members and prospective members to attain the ADCH Minimum Welfare & Operational Standards, through purchase of necessary equipment, training etc

Please ensure you read the guidelines carefully before starting your application

Please ensure you complete all sections. Incomplete applications cannot be considered by the Grants Committee

Please ensure that any enclosed documents are clearly identified with the name of your organisation

For further information please contact Margaret Hulme, Grants Manager, grants@Battersea.org.uk

|  |  |
| --- | --- |
| **For Office use only**  |  |
| **Project Ref number**  |  |
| **Date of Assessment**  |  |

**Section One**

Organisation Information

|  |  |
| --- | --- |
| Name of Applicant Organisation (and legal name if different) |  |
| Type of Organisation (Charity / Not for Profit etc) |  |
| Charity registration number (if applicable)  |  |
| Registered Address including Post Code |  |
| Website if applicable |  |
| Main telephone number  |  |
| CEO / or equivalent  |  |
| **Please confirm (by ticking the box below) that you are applying for a MS Grant in order to assist you in attaining the standard** |
| a. We are a rescue working towards Minimum Standards and have completed an initial assessment and / had an assessment visit  |  |

|  |  |
| --- | --- |
| **Date of Assessment**  |  |
| **Assessment carried out by** |  |
| **In the presence of**  |  |
| **Self or external assessment** |  |

Please give us the name of the Primary contact for this funding Application (someone we can contact if further information is needed and normally the person who will be responsible for the use of the grant activity)

|  |  |
| --- | --- |
| Title  |  |
| First Name |  |
| Surname  |  |
| Email  |  |
| Best Phone Number |  |
| The best time of day to contact you by phone |  |

If the primary contact is not the CEO / Manager, please tick this box to confirm that they are happy for you to submit this application on behalf of your organisation.

 Yes – my CEO is happy for you to consider this application

**Safeguarding**

 We have a safeguarding Policy in Place (uploaded)

Safeguarding Policy Uploaded

We do not have a safeguarding policy in place and would welcome Battersea’s support in helping to develop one and ensure that we understand safeguarding requirements prior to any funding being given and project work commencing.

**Section Two**

Financial Information

Battersea wishes to have a clear understanding of the financial health of your Organisation to help the Grants Committee make an informed decision. Please answer the questions below.

|  |  |
| --- | --- |
| Financial year to which figures relate |  |
| What is your Organisation’s annual income as shown in your most recent audited accounts  |  |
| What is your Organisation’s annual expenditure as shown in your most recent audited accounts  |  |
| What is your Organisation’s current level of reserves |  |
| What is your Organisation’s current level of unrestricted reserves |  |

Please attach a copy of your most recent audited accounts. If they are more than 6 months old please send the most recent management accounts / Income & Expenditure statement. This will give us a more accurate picture of the financial position of your Organisation.

Bank Information – please note this must be the account details belonging to your organisation. We **will not** pay any grant into an individual’s account.

|  |  |
| --- | --- |
| Name of Bank |  |
| Bank Address |  |
| Bank Account Number  |  |
| Sort Code |  |
| Name of authorised signatory |  |

|  |  |
| --- | --- |
| No of Full time staff in your organisation |  |
| No of Part time staff in your organisation |  |
| No of volunteers in your organisation  |  |

Please tell us briefly about the aims and main activities of your Rescue / Shelter. Please include number and types of animals you rehome each year, education, outreach activities etc. (750 words)

**Section Three**

1, Which area(s) do you need to improve in order to comply with ADCH Standards (Column A)

 Please tell us which section you are applying for Grant Aid (Column B)

 **You must complete / tick at least one box and link directly to your assessment.**

|  |  |  |
| --- | --- | --- |
|  | **Column A** | **Column B** |
| Admission & Vet checks  |  |  |
| Cleansing and disinfection  |  |  |
| Home fostering |  |  |
| Environment and companionship  |  |  |
| Food and water |  |  |
| Litter Trays |  |  |
| Vet Care |  |  |
| Disease Control and vaccination  |  |  |
| Supervision |  |  |
| Grooming  |  |  |
| Training and behaviour  |  |  |
| Animal Assessment |  |  |
| Neutering  |  |  |
| Feral cats (if appropriate) |  |  |
| Transport of animals  |  |  |
| Euthanasia |  |  |
| Rehoming (Cat / Dog)  |  |  |
| Management |  |  |

2. Please tell us about the activities that will support you in achieving the Standard(s) you have identified in **Q1. Column B**

 - what are the activities, what they will achieve, and when they will be completed. (This is an important question. Funded activity must take place within 3 months of a grant being awarded)

|  |  |  |
| --- | --- | --- |
| **Activity**  | **Desired Outcome**  | **Date of completion**  |
|  |  |  |
|  |  |  |
|  |  |  |

**Section Four**

Budget Information

|  |  |
| --- | --- |
| Total cost of Project |  |
| Amount Requested from Battersea |  |
| Project Start Date |  |
| Project End Date  |  |

Breakdown of Project Budget – please tell us here about the elements you wish to be funded through this application. Please only complete the lines for which you are requesting funding for.

|  |  |
| --- | --- |
| Salary |  |
| Management costs |  |
| Other Staff costs |  |
| Kennel / Cattery costs |  |
| Equipment |  |
| Other expenses |  |
| Marketing / publicity costs |  |
| Travel |  |
| Venue costs |  |
| Volunteer expenses  |  |

If the cost of your proposed project is more than the amount requested from Battersea – please tell us where the rest of the funding will be coming from. If you are applying for funding from other trusts and foundations please remember to tell us when you expect to hear the outcome. (\*)

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Funder | Amount Requested | Date of outcome (\*) | Outcome  |
|  |  |  |  |
|  |  |  |  |

**Section Five**

Additional Information

Please give any further information about your Organisation or your project which is relevant to this Application. In particular you may wish to provide further information about tell us about future improvement plans especially around Animal welfare, Management, or Housing Conditions. (1000 words)

Please note that on receiving your Application we will send you an acknowledgement and provide you with a reference number which we ask you to please use in any subsequent correspondence with us. On receipt of an Application it may take up to six weeks to consider your Application. We will inform you in writing of the decision.

Successful Applicants are required to acknowledge receipt of the grant and agree to any conditions attached to it before any payment can be released. Subsequent payments will be conditional on receipt of a satisfactory progress report, along with a case study – outlining what has been achieved through receiving a Grant from Battersea and the benefits to dogs and/ or cats.

**Your privacy rights**

The data you’ve provided will be used by Battersea Dogs & Cats Home to assess your application for a grant and to communicate with you regarding your Application. Should your Application be successful we will use your data to manage your Grant.

To help better understand and tailor communications, we may analyse information provided, including information from public sources.

Further information about how we protect and use personal data is set out in our [Privacy Policy](https://www.battersea.org.uk/%E2%80%8Bcookies-and-privacy-policy) at: battersea.org.uk/privacy

Please note that the deadline for Applications is **12 noon on Wednesday 14th October 2020.**

Please ensure that this application is signed by the appropriate person.

Please tick to confirm -

 I have read all the guidelines

I have notified you of the MS Assessment date and Assessor

I have completed every question on this form

 I have included our latest income / expenditure accounts

We are happy to receive via email or print copy, future grant news and opportunities