

**North East Inner City Initiative - Community Grant Scheme 2020**

Cuirtear fáilte roimh aighneachtaí agus imeachtaí/tionscnamh i nGaeilge

Tá leagan Gaeilge den fhoirm seo ar fáil

 **APPLICATION FORM**

**Please ensure you have read the Scheme Guidelines and completed this form in full before submitting your application**. Should you require any assistance with completing the form please contact the NEIC Programme Office neic@dublincity.ie  Ph: 01-222 2253

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| **SECTION 1 - APPLICANT DETAILS:** |
| **Organisation / Group Name** |  |
| **Contact Person**  |  |
| **Email Address (which will be used for correspondence)** |  |
| **Phone No.** |  |
| **Website** |  |
| **Postal Address** |  |
| **Registered Charity Number (if applicable)** |  |
| **Tax Reference Number (if applicable)** |  |
| **Tax Clearance Access Number (if applicable)** |  |
| **Please provide a brief overview of your Organisation/ Group and describe its day to day activities (Maximum 100 words):** |
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| **What is your Organisation/Group structure i.e (Company Limited by Guarantee, Co-operative, Voluntary, Constitution, Charity, Trust or other). Please specify:** |
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| **How does your Organisation/Group currently fund day to day operation and activities?** |
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| **SECTION 2 – DETAILS OF PROJECT/PURCHASE** |
| **Please provide a description of the proposed project/ purchase**  |
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| **Nature of the capital spend proposed:** | **Cost** |
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| *Please include with your application a written quote or a print-out from a supplier website as evidence of cost.* |
| **Please explain the need for the proposed project/purchase of equipment, the section of the NEIC community your service benefits (e.g children/families/older people/ people with disabilities /new communities) approximate number of people who will benefit and how often it will be in use:** |
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| **Please provide details of the physical locality within the NEIC community your service benefits:** |
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| **If successful, when will the equipment be purchased or the proposed project begin?** |
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| **Have you applied to other agencies for a portion of the funding: Y/N** |
| **Name of Funder:** |  |
| **% of costs applied for:** |  |
| **What contingency plans have you in place should one of the applications be unsuccessful in getting the funding?** |  |

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| **Please provide details of your capacity to deliver this project (e.g. Previous experience)** |
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| **APPLICANT STATEMENT****(Must be signed by the Chairperson, Secretary, Treasurer or other authorised representative of the organisation making the application)** |
| I confirm that I have read the Scheme guidelines, completed all relevant sections of this application form and I confirm that all information provided is accurate and truthful.I also confirm that the applicant group/organisation does not have the funding to undertake the project/purchase the equipment without this grant aid or alternatively that with the grant the applicant group/organisation will now undertake a larger project or purchase equipment which we otherwise could not afford.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Name (Printed) Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Position Date** |

Deadline for receipt of completed application forms is **Tuesday 30th June 2020**

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| **Checklist** - have you provided the following:* E-mail address
* Evidence of cost from your supplier (quote or print-out from supplier website)
* Signed declaration

Completed applications will be accepted from Monday 4th May 2020 until Tuesday 30th June 2020Completed applications to be submitted by email to neic@dublincity.ie or by post / hand delivery to:**NEIC Programme Office,****C/O Dublin City Council, Central Area Headquarters,****51-53 Seán MacDermott Street Lower,****Dublin 1,****D01 HW44.****Please ensure you have read the Scheme Guidelines and completed the form in full before submitting your application.** |