



# Can Do Community Grants

# Application Form

PROJECT GRANTS OF UP TO £500





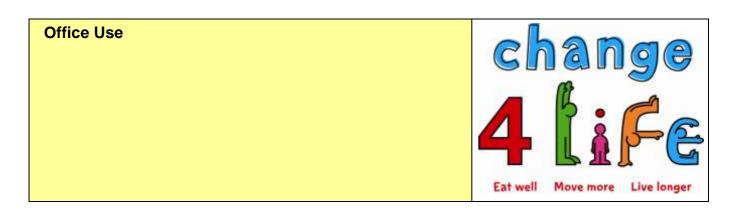


#### **Can Do Community Grants Guidance**

All applications have to meet the following criteria, you need to answer yes to all!	Yes	Office Use				
The idea of an individual community member or small group, who will lead the activities						
<ul> <li>Small, voluntary community-based activity, not designed by paid workers</li> </ul>						
The project will support those involved to develop their skills						
At least 85% of beneficiaries are from Tower Hamlets						
The project is new or a development of existing activities						
Good value for money						
Project run in the paired LAP area						
Can Do Grants will support projects that make Tower Hamlets a healthier environment and meet one or more of the following priorities	Yes	Office Use				
Active Lives e.g. more physical activity						
Active Travel e.g. cycling or walking your usual routes						
Healthy Food e.g. grow your own food projects						
The following cannot be funded:						
Applicants that are paid to run the project						
Promotion of a political ideology						
Travel overseas						
Travel overseas						

#### **Applications from young people**

We welcome applications from young people. Where an applicant is under 18 years of age it is necessary to have a sponsor who will guarantee to support them throughout the project. The sponsor must provide their contact details and signature in section 6 of the application form.



How many people are involved in running your project?							
re you all local reside	nts / community me	embers?		Yes	No 🗆		
If no explain who else is	s involved:						
ain Contact's Details							
First name:		Last	name:				
Home or contact addre	ess:						
		Pos	tcode:				
How would you like us t	o contact you?						
Home phone:	☐ Work phone:		Mobile:				
Email address:							
. Your community in eople), neighbourhood	your area do you a			• • • • •	, , , ,		
At least 85% of bene	ficiaries are from T	ower Han	nlets?				
res							
	vou plan to roach	through t	his project?	Please tick	one box:		
How many people do	you plan to reach	un oagn t					

# 3. Your project or idea a) Describe in no more than 200 words the activity you would like to organise? Try to describe how you plan to carry out the project, including steps you will take to make your idea work: b) When do you hope this project will start? c) When will this project be complete (This project must be completed by end Sept 2012). When will you know that this project has been successful? d) Who else is involved in this project? How will they help you? What is/are their role(s)? e) Which of the Can Do priorities does your project meet? You can tick more than one if relevant. (See guidance notes for further information on this). Active Lives Active Travel Healthy Eating f) How does your project meet the priorities you ticked above?

g) How will you know this project has been successful?					
4. You and your experience a) Why do you want to carry out this project? What is your motivation?					
The second secon	vinacis your monvation.				
b) Do you need help in turning this idea into reality? The Can Do programme is keen to support you to develop relevant skills so please list any training that might help you.  Yes \[ \begin{align*} \text{No } \equiv \text{ \text{No }} \equiv \text{No } \equiv \t					
If yes, what help do you require?					
5. The future If your idea goes well, what do you see happening next? What are your long term goals?					
6. Declaration Can Do Grants are only offered to individuals who will carry out their project on a voluntary basis. Please sign the following statements:					
I confirm that I will carry out the project activity	described in this form on a voluntary basis.				
Your name:					
Your signature:	Date:				
Are you under 18? Yes No					
	this form (soo guidance notes)				
If yes, you will need a sponsor to countersign Sponsor's name:	this form (see guidance notes)				
	Date:				
Sponsor's signature: Sponsor's Contact Address:	Date.				
Sponsor's Contact Address.	Postcode:				
Email address:	1 USILUUG.				
Relationship with applicant:					
Incialionality with applicant.					

#### 7. Budget

#### Please provide a breakdown of the things you will need to carry out the project.

- Include as much detail as you can about the cost of every type of thing that you need to pay for.
- You can include things that will be donated (in kind) or that you will borrow; this will show that you have thought about how to make the best use of local resources.
- You can use the 'notes' column to explain why the item is needed or to say if the cost is a quotation.

Item	Rate/number/per item.	£	Notes
	Total	£	
	Amount requested	£	
If the amount requested is less than the			
	ease say how you will raise the e and if this is secured or not?		

Closing Dates: 5pm, Sunday 24<sup>th</sup> June, 2012
Please return your completed form by hand, in post or by email to the
Community Development Worker for the area where your project is
primarily based from the list below:

### Osmani Trust (LAPs 1 and 2)

58 Underwood Road,

**E1 5AW** 



Stifford Centre (LAPs 3 and 4)

2-6 Cressy Place,

**E1 3JG** 



**Alema Akthar** 

Email: cando@osmanitrust.org

Tel: 0207 247 8080 Mob: 07960 035835 Afzal Mahmood & Selma Piro

Email: <u>info@stifford.org.uk</u>

Tel: 020 7790 3632

Mob: 07956 413417 (Afzal)

## Bromley by Bow Centre (LAPs 5 and 6)

St Leonards Street, E3 3BT

Riarna Pinnock

Email: riarna.p@bbbc.org.uk

Mob: 07507 556923



### Island House (LAPs 7 and 8)

Roserton Street, Isle of Dogs,

E14 3PG



Email: cando@island-house.org

Tel: 0207 531 0312 Mob: 07407 629784

