**VCSE Covid Recovery Fund**

***Please note this form is for information purposes only – applications to the VCSE Covid Recovery Fund must be made using the online application process.***

**APPLICATION**

**Part 1 – Organisation Details**

**Q1 - Organisation Name**

|  |
| --- |
|  |

**Q2 - Organisation Address**

|  |
| --- |
| Address Line 1 |
| Address Line 2 |
| Town |
| County |
| Postcode |

**Q3 Website Address**

|  |
| --- |
|  |

**Q4 – Council Area (choose 1)**

|  |  |
| --- | --- |
| 1. Antrim and Newtownabbey | 1. Ards and North Down Borough Council |
| 1. Armagh City, Banbridge and Craigavon Borough Council | 1. Belfast City Council |
| 1. Causeway Coast and Glens Borough Council | 1. Derry City and Strabane District Council |
| 1. Fermanagh and Omagh District Council | 1. Lisburn and Castlereagh City Council |
| 1. Mid and East Antrim Borough Council | 1. Mid Ulster District Council |
| 1. Newry, Mourne and Down District Council |  |

**Q5 – NI Assembly Area (choose 1)**

|  |  |  |
| --- | --- | --- |
| 1. Belfast East | 1. Belfast North | 1. Belfast South |
| 1. Belfast West | 1. East Antrim | 1. East Londonderry |
| 1. Fermanagh and South Tyrone | 1. Foyle | 1. Lagan Valley |
| 1. Mid Ulster | 1. Newry and Armagh | 1. North Antrim |
| 1. North Down | 1. South Antrim | 1. South Down |
| 1. Strangford | 1. Upper Bann | 1. West Tyrone |

**Q6 - When was the organisation Constituted:**

(Organisations must have been constituted at least 12 months before the date of application to be eligible for an award)

|  |
| --- |
|  |

**Q7 - Do you have a constitution in place?** Yes/No

**Part 2 – Contact Details**

**Q8 - Name of Contact Person**

|  |
| --- |
|  |

**Q9 - Email Address of Contact Person**

|  |
| --- |
|  |

**Q10 -Telephone Number Mobile**

|  |
| --- |
|  |

**Q11 – Telephone number Landline**

|  |
| --- |
|  |

**Part 3 – About the Organisation**

**Q12 - Describe the role of your organisation?**

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| --- |
|  |

**Q13 – Which of the following words best describes the main activity of the organisation:**

|  |  |  |
| --- | --- | --- |
| Community Development | Men | Women |
| Early Tears | Youth | Elderly |
| Arts | Sport | Culture |
| Disability | Health | Faith |
| Training/Education | Advice | Other |

**Q14 – Organisation Bank Details**

|  |  |
| --- | --- |
| Account Name: |  |
| Bank/Building Society Name: |  |
| Bank/Building Society Address: |  |
| Sort Code: |  |
| Account Number: |  |

**Part 4 – Covid -19 and your organisation**

|  |  |  |
| --- | --- | --- |
| Have Covid restrictions negatively impacted on your organisational activities compared to pre-Covid activity levels? | YES | NO |
| If you answered YES, what has been the percentage decrease in activity levels compared to the pre-Covid period? | Less than 10% decrease |  |
|  | 10-25% decrease |  |
|  | 25-50% decrease |  |
|  | 50-75% |  |
|  | 75-100% decrease |  |
| Will this equipment have a positive impact on your organisational activities | YES | NO |
| If you answered YES, what do you expect will be the percentage increase in your activity levels compared to those that were taking place during the period of Covid restrictions? | More than 10% increase |  |
|  | 10-25% increase |  |
|  | 25-50% increase |  |
|  | 50-75% increase |  |
|  | 75-100% increase |  |
| When do you expect activities to return to pre-Covid levels | Insert date |  |

**Q16 – In less than 100 words, please describe what items you are applying for and how these items will be used to help the organisation address the impact of Covid-19 on its activities and programmes.**

|  |
| --- |
| 100 word limit/600 characters |

**Part 5 – BUDGET**

**Q17 What is the Total Amount you are applying for?**

|  |
| --- |
|  |

**B - FUTURE NEEDS**

**PPE and Sundry Equipment Items– Maximum Award - £5,000**

**N.B. Organisations which have previously awarded funding for PPE and Sundry Equipment from this programme can re-apply to this call. However, the maximum that can be awarded for PPE and Sundry Equipment cannot exceed £5,000 across both applications.**

The VCSE Covid Recovery Fund allows organisations to apply for funding for both Personal Protective Equipment and sundry equipment which enables them to address the impact of Covid 19 on their services and activities they deliver to the community. Examples of the type of equipment that will be supported through this Fund include:

1. Personal Protective Equipment
2. Protective screens
3. Foggers and Sanitising Stations
4. Cleaning materials such as disinfectant, sanitising fluids, hand-gels
5. Temperature checking equipment e.g. thermometers
6. Signage
7. Service user/Customer Flow systems
8. Software licensing costs if it can be evidenced that such costs enable and enhance service delivery difficulties resulting from the impact of Covid-19.

**Description and Quantity of PPE and Sundry Equipment:**

|  |
| --- |
| **e.g.**  **sanitising Stations x 10** |

**Total Costs of PPE and Sundry Equipment requested:**

|  |
| --- |
| **Cannot exceed £5,000** |

**Q16 - Other Funding**

Have you applied to any other funder for the items included in this application? If so please give details below.

|  |
| --- |
| **200 character limit** |

**16. Equality Monitoring - who will benefit from your project? –**

Your answers will help us to understand who benefits from our funding, but this information is not used to decide if the project will be funded. Please tick those boxes which best describe the groups who will benefit from this project

|  |  |
| --- | --- |
| **Will your project mostly benefit people of a particular gender?** | |
| Both males and females |  |
| Mostly males |  |
| Mostly females |  |

|  |  |
| --- | --- |
| **Will your project mostly benefit people from a particular age group?** | |
| All age groups |  |
| Mostly 0 – 24 years |  |
| Mostly 25 – 64 years |  |
| Mostly 65 + years |  |

|  |  |
| --- | --- |
| **Which community do the people who will benefit from your project belong to** | |
| Neither Catholic or Protestant |  |
| Mainly Catholic |  |
| Mainly Protestant |  |
| Both Catholic and Protestant |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Will your project mostly benefit people of a particular religion or belief?** | | | |
| Christian |  | Jewish |  |
| Muslim |  | Sikh |  |
| Hindu |  | Buddhist |  |
| Other religions or beliefs |  | No particular religion or belief |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Will your project mostly benefit people from a particular ethnic background?** | | | |
| White |  | Black Caribbean |  |
| Black African |  | Black Other |  |
| Bangladeshi |  | Indian |  |
| Pakistani |  | Chinese |  |
| Mixed Ethnic background |  | Irish Traveller |  |
| Other (please indicate) |  | | |

|  |  |
| --- | --- |
| **Will your project mostly benefit people of different marital status?** | |
| Yes |  |
| No |  |

|  |  |
| --- | --- |
| **Will your project mostly benefit people with caring responsibilities?** | |
| Yes |  |
| No |  |

|  |  |
| --- | --- |
| **Will your project mostly benefit people with disabilities?** | |
| Yes |  |
| No |  |

|  |  |
| --- | --- |
| **Will your project mostly benefit members of the LGBT community?** | |
| Yes |  |
| No |  |

**17 - DECLARATION SECTION**

**Declaration**

a) Terms of Grant - You must read the standard terms of grant for this programme on our website. By completing this Declaration, you are confirming that your organisation accepts these terms.

b) Freedom of Information and Data Protection We are committed to being as open as possible. This includes being clear about how we assess and make decisions on our grants and how we will use your application form and other documents you give us. As a registered data controller, Co-operation Ireland follows all data protection laws and regulations. As part of the application process we will collect your name and position at the organisation you represent and will share this information with the Department for Communities. We will not transfer your data to any third parties. Our Privacy Policy contains additional information including contact information for our Data Protection Officer. It can be found on the Co-operation Ireland website.

**Data and Freedom of Information**

When you complete the Declaration at the end of the application form, you are confirming that you understand our legal responsibilities under data protection legislation and the Freedom of Information Act 2000 and have no objection to us releasing the details of your organisation and project sections of the application form to anyone who asks to see them once your application has completed the assessment process. If there is any information in these sections of the form that you don't want made publicly available, please explain your reasons below:

|  |
| --- |
|  |

**Data Protection**

We will take these into account when we respond to any request for access to those sections. We may also be asked to release other information that you provide to us. We will respond to these requests after taking account of your rights and expectations under Data Protection legislation. In those cases, we will always consult you first. We will not be responsible for any loss or damage you suffer as a result of our meeting these responsibilities:

* To decide whether to give you a grant.
* To provide copies to other individuals or organisations who are helping us to assess, monitor and evaluate grants.
* To share information with organisations and individuals working with us with a legitimate interest in applications and grants or specific funding programmes.
* To hold in a database and use for statistical purposes.

If we offer you a grant, we will publish information about you relating to the activity we have funded, including the amount of the grant and the activity it was for. This information may appear in our press releases, in our print and online publications, and in the publications or websites of relevant Government departments and any partner organisations who have funded the activity with us.

**Contact**

We may contact you from time to time to keep you informed about the work of Co-operation Ireland.

**Confirmation**

* I confirm that the organisation named on this application has given me the authority to complete this application on its behalf.
* I confirm that the organisation has not received grant aid from any other source for the items included in this application to the *Covid Recovery Fund*
* I confirm that the activity in the application falls within the purposes and legal powers of the organisation.
* I confirm that the organisation has the power to accept and pay back the grant.
* I confirm that if the organisation receives a grant, we will keep to the standard terms of grant, and any further terms or conditions as set out in the grant notification letter, or in any contract prepared specifically for the project.
* I confirm that, as far as I know, the information in this application is true and correct.

**18 - Name**

**19 – Position in Organisation**

**20 - Date**

|  |
| --- |
|  |

**What happens Next**

We will be in touch following submission of your form to us.

You will receive 2 emails requesting that you submit additional documentation to enable us to verify:

1. The details of the organisation
2. The eligibility and cost of the items you have included in your application

If you have any queries, please contact us by sending an email to [covidrecovery@cooperationireland.org](mailto:covidrecovery@cooperationireland.org)