

OFFICE OF THE POLICE AND CRIME COMMISSIONER FOR LANCASHIRE COMMUNITY FUND

Section A: Your Organisation

| Name of Organisation: | | |
|-------------------------|------------|--------|
| | | |
| Project Organiser: | | |
| | | |
| Telephone No: | | Email: |
| | | |
| Address: | | |
| | | |
| | | |
| | | |
| Preferred contact metho | od: | |
| Email: | Telephone: | Post: |

Section B: Your Project

| Name of Project: | | | | |
|--|--------------------|--|--|--|
| | | | | |
| Project Location: | | | | |
| | | | | |
| Proposed Start Date: | | | | |
| | | | | |
| Proposed Duration: | Proposed End Date: | | | |
| | | | | |
| Which of the Commissioner's priorities does your application support? | | | | |
| Getting Tough on Anti-Social Behaviour | | | | |
| Disrupting and Dismantling Organised Crime | | | | |
| Tackling Domestic Abuse and Sexual Violence | | | | |
| Cracking Down on Burglary and Robbery | | | | |
| Targeting Dangerous Drivers | | | | |
| Give an outline of the issue(s) you aim to tackle: | | | | |
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| Give an outline of your project and how you plan to address the issue(s) detailed above: | | | | |
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| How will your project have a positive impact on the local community? | | | | |
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Section B (continued): Your Project

If your project provides a service or support to individuals, please indicate how many people you plan to engage with: Adults Children Total cost of the project (£): How much are you requesting from the PCC? (£): Please provide a full breakdown of cost: (including any match funding) How will the project or initiative be monitored and evaluated, and any good practice shared with others? Please include what outcomes you expect. If there are any other partners involved in your project, please list them here: How have you engaged with your local Community Safety Partnership and / or Local Policing Team on your project?

Section B (continued): Your Project

If you have engaged with your local Community Safety Partnership / Local Policing Team please provide details of named contact(s):

| Name: | |
|-------------------|--------|
| | |
| Organisation: | |
| | |
| Role: | |
| | |
| Telephone Number: | Email: |
| | |
| | |
| Name: | |
| | |
| Organisation: | |
| | |
| Role: | |
| | |
| Telephone Number: | Email: |
| | |
| | |

Section C: About the Fund

| Where did you hear about the Commissioner's Community Fund? |
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| Police and Crime Commissioner's Website |
| Local Council / CSP |
| Your Local County Councillor |
| Local Neighbourhood Policing Team |
| Newspaper |
| Social Media |
| Word of mouth |
| Other (please specify) - |
| |
| |
| |
| Section D: Declaration |
| Please sign to confirm the information you have provided is true and accurate: |
| |
| (Please note electronic signatures may be used) By signing this form, you agree to the information about your organisation and this project being shared with other relevant agencies and partnerships. |

Terms and Conditions

Applications must demonstrate how the project supports one of the Commissioner's priorities.

The maximum grant that can be applied for is £10,000.

The minimum amount that can be applied for is £1,000.

Applications from local community groups, organisations, charities and Parish and Town councils must demonstrate how they are working with the local policing team and/or the local Community Safety Partnership.

(E.g., Community Safety Partnerships, Lancashire Constabulary, Local Reducing Reoffending Boards etc.)

Local community groups, organisations and charities must supply their Articles of Association and previous two years accounts with their application.

Organisations must have appropriate policies and procedures in place including safeguarding where appropriate, health and safety and equality and diversity.

The grant must be used for the project detailed on the application form and may not be used for any other projects.

If the full grant is not used for the proposed project or scheme any underspend must be returned to the Office of the Police and Crime Commissioner for Lancashire.

The Commissioner's logo must be used on all literature associated with the project.

The Commissioner must be invited to any launch events or openings associated to the project.

Applicants must complete and return an evaluation form.

By submitting this application form you are agreeing to the Commissioner's Terms and Conditions.

Monitoring Information

protected characteristics listed below. Male Female Trans, Gender Diverse and Non-binary people Not Targeted Young people (under 25) People 25-65 Older People (55+) Not Targeted People with disabilities (physical, emotional or mental) Not Targeted Gay Lesbian Bisexual Heterosexual Not Targeted Race (including ethnic or national origins, colour or nationality) Please specify:: Not Targeted Specific religion or belief Please specify: Not Targeted

Please indicate whether your project is specifically targeted at people within one or more of the

Monitoring Information (continued)

| Is your organisation set up to specifically advance the interest of any of the groups above and if so which ones (gender / gender reassignment / age / disability / sexual orientation / race / religion)? | | |
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KEEPING IN TOUCH

If you want to keep in touch, then you can:

Email: funding@lancashire-pcc.gov.uk

Post: Office of the PCC for Lancashire

PO Box 100, County Hall, Preston, PR1 OLD

Call: 01772 533 587

Web: Lancashire-pcc.gov.uk

f @LancsPCC

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For news updates sign up to **stayintheknow.co.uk** community messaging.



