

COMMUNITY MENTAL HEALTH SUPPORT GRANTS

APPLICATION FORM

Please complete all sections of this application form and return it by email to Ashley Hitchman, Ashley.Hitchman@reading.gov.uk by 5pm on Monday 3rd January.

If you need support to complete and submit the form, please get in touch with Herjeet Randhawa, RVA Advice Service Manager by email: herjeet.randhawa@rva.org.uk

The aim of this funding is to support mental health and wellbeing in vulnerable groups in Reading, by enabling local voluntary and community groups to create bespoke wellbeing workshops with Compass Recovery College, in a way that reflects the individual experiences and needs of their communities. Please read the guidance notes for full details on our priorities.

- **Your contact details**

Name:

Phone number:

Email address:

- **About your group**

Name of your group:

Where you are based and where you operate from:

Number of paid staff ____ Number of volunteers ____

Aims of your group, including which communities you usually work with and how you make contact and speak with them:

- **About the support you could provide with this project**

Please tell us about the mental health and wellbeing needs that you have observed within your community:

Please describe the type of support you'd like to co-produce with this funding - What workshops or training do you feel might be helpful for your communities? – Please check our guidelines and website for examples of workshops.

Please tell us about who will benefit from this project and how you will know it will make a difference to them:

- **Project costs**

Please let us know how you think the funding will be used in your community, what you expect to spend it on. This can include items like: room hire, printing, language support services, IT equipment, volunteers' and staff expenses (e.g. travel), specialists' fees (e.g. trainers or support staff)

Please don't include items that were purchased *before* the start of your project.

What you expect to spend the money on:

- **Signatories**

Please give the names of two signatories to your application. They must be committee members of your group:

Name: Role in your group: Date signed:	Name: Role in your group: Date signed:
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- **Declaration**

Please confirm that you are eligible to apply – put an x in the boxes (see Guidance Notes)

	You are a community group who is embedded within a local community in Reading and your community has been heavily impacted by the effects of Coronavirus.
	Your group's gross annual income is below £10,000 or are volunteer led.
	You are a constituted group.
	Your group has public liability insurance or will have before the project starts.
	Your group has safeguarding procedures in place and in some cases DBS checks depending on your activities.
	Your group has an Equal Opportunities policy or agreement.
	You have a bank account in the name of your group.

Please keep a copy of your completed application form.