



Croydon Relief in Need Grant Fund Online Application Form Guidance 2025

Getting ready to fill in your Online Application Form

Please ensure you have read through the <u>CRiN Grant Fund Policy 2025.pdf</u> before completing the Online Application Form.

If you need any help or have any questions, please do contact becyusuf@croydonalmshouses.org.uk or call 07511 181 768

Please note:

It is not currently possible to save the application and return to it. We have therefore copied the application form <u>questions</u> below and advise that you have all the information and relevant documents at the ready before you start completing the Online Application Form.

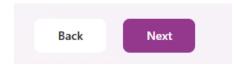
Some of the questions do have restrictions (e.g. character limits, numbers only). If a question restriction appears as 'The Value must be a number' you will be unable to add spaces between the numbers.

Completing the Form

Once you have prepared all the questions offline you can begin completing the form by clicking on this link - CRIN Grant Fund Application Form

Questions marked with a red asterisk (*) are mandatory. You will not be able to move on to the next section until you answer the mandatory questions.

At the bottom of each page of the form, you can click 'back or next' (image below) so you can review all the questions before submitting your completed application.



Immediately after Submitting the Online Application Form

Please ensure you email all the <u>supporting documents</u> (see page 6) to <u>becyusuf@croydonalmshouses.org.uk</u> after submitting your response.

Croydon Relief in Need (CRiN) Grant Fund Online Form Questions – for reference

Section 1

Have you discussed the application you are submitting with the Community Development Lead? If you answer 'No' we cannot accept your application. Please email becyusuf@croydonalmshouses.org.uk or call 07511 181 768 to arrange a discussion.

Section 2 - Your Organisation

Legal (formal) name of your organisation (*This is in your constitution, articles of association or other governance document*)

If your organisation also has a name by, which it is more commonly known, please state it here.

Postcode - your organisation's office or meeting place, if you have one.

Address - your organisation's office or meeting place, if you have one

Organisation's phone number

Organisation's email address

Website address (if applicable)

Social Media links (if applicable)

What is the legal status of your organisation?

- Registered Charity
- Community Interest Company
- A non-registered Group/Club/Society
- Exempt charity

Charity or Company Number (if applicable)

Use the space below to tell us about your organisation.

1700 character limit (including spaces)

What was your organisation's income in the last financial year or projected income for current year if you have been operating for less than 12 months?

If applicable what are your current unrestricted reserves and how many months does this cover?

Section 3 -The main contact person who we can talk to about the application

Full Name	
Role within the organisation	
Email address	
Phone number	

Section 4 - Description of the proposed service or project

CRiN funding can be used for the benefit of Croydon residents who are in need by reason of poverty or hardship, age, disability or other disadvantage.

Project Name

Please provide a short summary of the project you are seeking funding for. 200 character limit (including spaces)

What is the postcode of where the project will be located? 8 character limit (including spaces)

If the project will be taking place at more than one location, please use the postcode of the building or address where most of it will be happening. If the main location of your project is outside of Croydon please explain, in the next question, how you will connect residents from Croydon.

Description of your project -

2500 character limit (including spaces)

- How do you know that the project is needed in Croydon?
- How will your project meet the identified need? Refer to evidence if known.
- What service/activities will the project be offering and is there is a cost for your beneficiaries to access them?
- How it will be delivered (including number of sessions, timings, frequency)?
- If there are other organisations providing similar services to residents in Croydon, please explain why and in what way your service/activities are needed and how it will not duplicate what is already available.

Project Intervention Theme. Please tick the main theme that your project best aligns to or add if not listed.

- Advice and Information (e.g. housing support, welfare benefits)
- Cost of Living support (e.g. food insecurity, financial security)
- Mental Health (e.g. counselling, addiction recovery programme, bereavement, mindfulness)
- Practical Support (e.g. essential items, help with shopping)
- Physical Health (e.g. sports, walks, dance))
- Social (e.g. lunch clubs)
- Other (if not listed)

Who are your main beneficiaries who will benefit from the project or service? please select at most 3 options

- Adults living with a disability
- Black, Asian and Minority Ethnic Groups
- Carers (informal not paid)
- Children and Families
- Children living a disability
- Homeless People or/and people at risk of homelessness
- LGBTQ+
- Men and Boys
- Older People
- Refugees and Asylum Seekers
- Travellers
- Women and Girls
- Young People
- Other (if not listed)

How many beneficiaries do you estimate your project or service will support during the period you are requesting funding for?

Beneficiaries must be resident in Croydon, however, the funding may benefit a minority of people from out of Croydon.

If the project location is not in the top 30% of areas of deprivation (Indices of Multiple Deprivation Decile 1-3), are at least 60% of the beneficiaries being supported living in these areas?

In line with the Croydon Relief in Need Grant Policy 2025 the trustees are keen to support projects being delivered in areas of deprivation. We class these areas as those located in the top 30% of areas of deprivation (Indices of Multiple Deprivation Decile 1-3).

To check your project location or whether your main beneficiaries are living in these areas (if your project is not located in an area of deprivation) please <u>Click Here</u>
Yes, No or Unsure

Please tick which outcome/s your project best aligns to: -

- Increased wellbeing
- Reduced loneliness
- Increased ability for people to manage their own lives

Croydon Almshouses have embedded a Theory of Change in their work and are seeking to fund projects that deliver those outcomes and demonstrate impact.

Our Theory of Change vision includes working with partners (e.g. CRiN grant recipients) who will contribute towards the vision of a Croydon where more people can live with dignity and independence.

List the project outputs that align to the Croydon Almshouses Theory of Change outcomes. 1500 character limit (including spaces)

e.g. Deliver 48 weekly lunch club and activity sessions for 10-15 residents aged over 60

How will you measure the outputs and outcomes to demonstrate impact? 1500 character limit (including spaces)

Estimated Project Start Date & Estimated Project Completion Date

Section 5 - Cost of the proposed service or project

How long are you seeking the CRiN Funding for?

- 6 months
- 1 year
- 2 years
- 3 years (maximum period)
- Other

Total cost of project (£)

Amount being applied for from the CRiN grant fund (£)

Are you seeking 100% of project funding from CRiN? Yes or No

Other funds (e.g. trust funding, lottery, corporate, reserves) or/and status of applications (if applicable) being used to cover the total cost of the project

Project Budget

If you would prefer, please email your project/service budget document to becyusuf@croydonalmshouses.org.uk

Section 6 - Volunteering

Estimated number of volunteers - *Please estimate the number of volunteers that would give their time for this project/service.*

Estimated total volunteer hours for the duration of the project/service.

Section 7- Additional information/comments (optional)

Section 8 - Grant Terms and Conditions

- 1. By submitting this application form, you are agreeing that, if a grant is awarded, you will comply with these terms and conditions.
- 2. We will assess your application for funding based on the information on this form. When you submit it, you are confirming that, as far as you are aware, the information is accurate. If it is later found to be inaccurate, we may withhold, withdraw or in some cases recover funding from you. We may also ask for additional information or clarifications.
- 3. You must use the grant for the purpose for which it is awarded. If you do not, we may ask for the money back. Unless indicated otherwise by us at the time of payment, we will require grant monies received to be held by your organisation as "restricted funds". We know that circumstances can change but you will need to get our permission in writing if you want to use the grant money (or part) in a different way.
- 4. We will request proof of purchase for all capital spends over £2,000.
- 5. If your application is successful, we will send you and require you to complete one of our report forms at the end of every 12 month period or when your project comes to an end if it is less than 12 months.
- 6. If your funding request in this application is a contribution towards a project and you do not secure the balance of funding to start the project within 6 months of our decision date, we reserve the right to withdraw the funding.
- 7. All successful projects must start within 6 months of the funding outcome notification.

Data Protection We will use information contained in this form in accordance with the General Data Protection Regulations which came into force in May 2018. By signing this form, you accept that we will retain and use the information provided by you only for the purpose of grant assessment and management. We will retain this information for no more than 7 years from the date of the initial enquiry or the end of the grant if awarded. We will retain the name of the Charity/organisation, the project title and description and the amount of the grant indefinitely.

I confirm that I will email the supporting documents requested to becyusuf@croydonalmshouses.org.uk upon submission of this application form

Annual Report (if applicable)	Most Recent Accounts (please send projected forecast if organisation is under 12 months old)
Most recent bank statement for organisation	Safeguarding Policies
Project Budget (if you did not complete related question)	Governing document if you are not a registered charity or/and company
Supporting Letter/s (if applicable)	•

Full Name and of Person Submitting this application

Role with the organisation of the person submitting this application