

Mae'r ffurflen hon hefyd ar gael yn Gymraeg
This form is also available in Welsh



Cyngor Castell-nedd Port Talbot
Neath Port Talbot Council

Appendix 1

Third Sector Grant Fund

2025-2026

(One year funding)

Guidance and

Application Form

For activities / projects up to a maximum of £25,000

(Excluding core funding)

Contents

Guidance

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Application Form

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Before submitting your application please ensure:	
<input type="checkbox"/>	Application in completed in full and signed
<input type="checkbox"/>	The amount applied for is clearly stated
<input type="checkbox"/>	A copy of last financial year's accounts provided
<input type="checkbox"/>	A copy of your insurance certificates are included
<i>Please note:</i> <i>Funding will be paid to successful applicants on or after 1st April 2025.</i>	

Part One: Important information before you start your application

a) Completing the form

- Please make sure you have answered every question and read your application before you send it to us
- If you are able to scan your completed application form please email the scanned version to: thirdsectorgrants@npt.gov.uk putting the name of your organisation from Question 1 into the email subject line

b) Help with your application

If you have any questions about the grant process or completing this application form, or if you need it in a different format (for example large print), please contact:

Corporate Policy - email thirdsectorgrants@npt.gov.uk

Part Two: Process Summary

c) What are we looking for?

Applications that demonstrate:

- i. How proposed activities will support the delivery of the council's policies and priorities. These are summarised in the Council's Corporate Plan 2024-2027. **(add link)**.
- ii. How proposed activities will reduce demand on council services
- iii. How council funding will be used to lever in additional resources in support of council policies and priorities are particularly welcomed.
- iv. Financial sustainability. The council will wish to be satisfied that the applicant is not dependent on continuing council funding to achieve financial sustainability.

In addition to the above criteria, it is proposed applications also demonstrate how the activities outlined in their applications will contribute to any of the following key issues where the council is currently experiencing increasing demand and cost:

- Tackling Child Poverty
- Mental Health

- Vulnerable Adults

d) How will applications be assessed?

Applications will be assessed against the evaluation matrix attached at Appendix 1.

e) Who can apply / what can you apply for? –

Please refer to the Scheme [\(add link\)](#)

f) How much can you apply for?

You can apply up to a maximum of £25,000 for activities/projects.
(Excluding core funding)

APPLICATION FORM

Part Three - Your organisation and contact details

1. Organisation name

What is the full legal name of your organisation, as shown in your governing document?

2. Does your organisation use a different name in your day to day work? (please tick)

Yes No

If yes, what other name do you use?

3. What is the main or registered address, including postcode for your organisation?

Postcode:

Phone Number one:

Phone Number two:

At least one of these numbers must be a landline

4. What is the main email address for your organisation?

This should be the email address people use to contact your organisation. It can be a personal email address if your organisation doesn't have one.

5. Does your organisation have a website address? (please tick)

Yes No

If yes, what is the address?

6. What type of organisation are you? (please tick the most appropriate)

Type of Organisation	✓
Registered Charity (please provide Registration Number)	
Voluntary Organisation	
Social Enterprise	
Housing Association	
Development Trust	
Other (please specify)	

7. Is your organisation independent or a branch of a larger organisation? (please tick) *An independent organisations will have its own governing document and can manage its own funds and staff.*

Independent **Branch**

If you are a branch, what is the name and address, including postcode of the larger organisation?

Postcode:

If we offer a branch a grant we will ask the larger organisation to accept overall responsibility for it.

8. When was your organisation set up?

Please give the date when your organisation adopted its current legal status. This should be on your governing document. All organisations need to provide this date.

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9. What is your organisations current financial position?

It is essential that financial need for this grant can be evidenced clearly.

Please insert the amounts from your latest annual accounts and submit a copy of the latest annual accounts with the application form

What was the date of your organisation's most recent annual accounts year ended (dd/mm/yy):		
Income: £	Expenditure: £	Balance carry forward: £
Restricted Reserves: £	Unrestricted Designated Reserves: £	Unrestricted General Reserves: £

Please tell us what your organisation's reserves policy is:

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10. Do you anticipate any changes to your orgainsatonal structure over the next year? (please tick)

Yes No

If yes, please provide more detail

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Part Four - Information on what the funding will support

11. Why is the funding you have applied for important? (approx. 400 words)

A large empty rectangular box provided for the applicant to write their response to question 11.

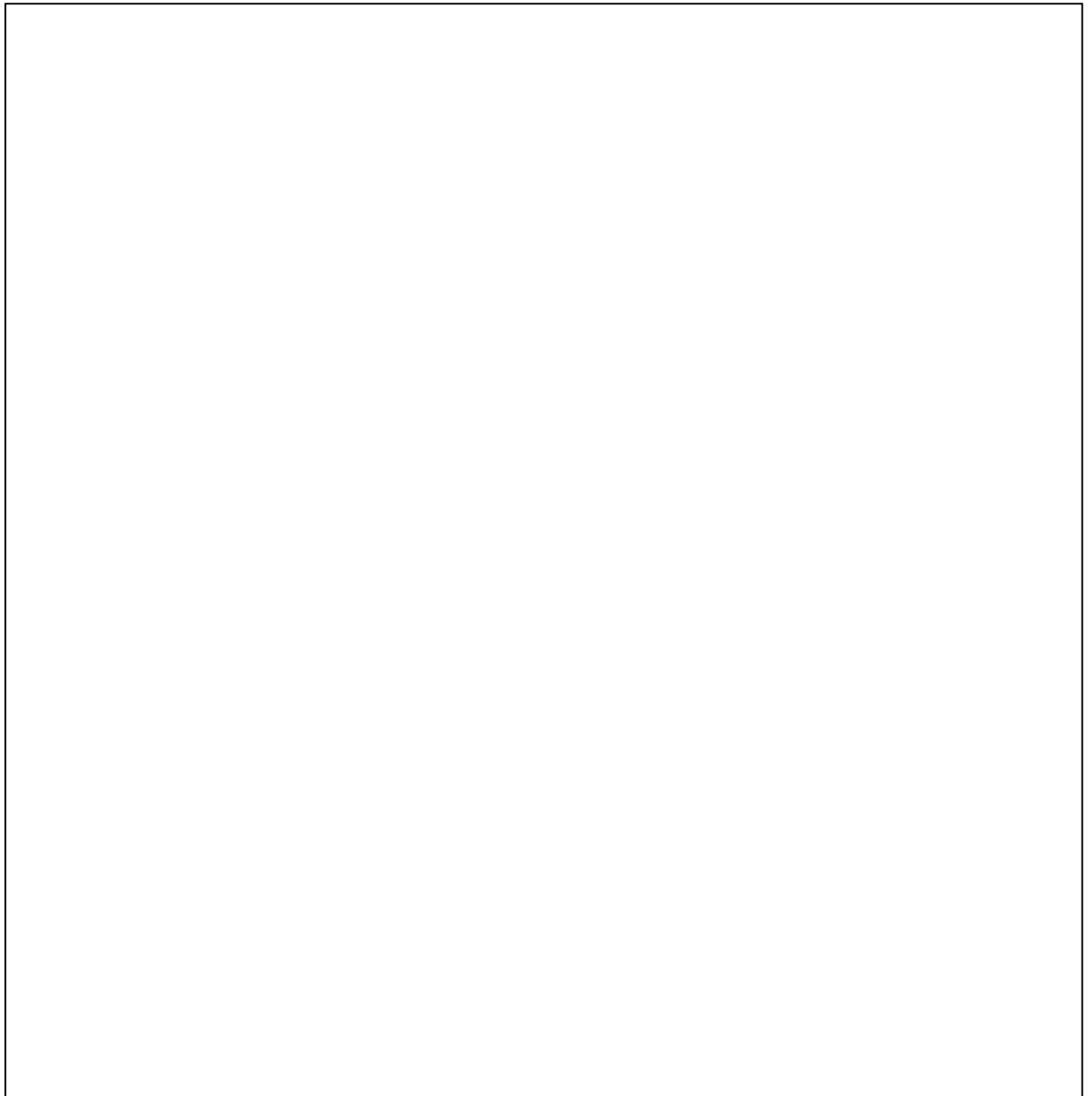
12. What will the funding deliver? (approx. 600 words)

- Summarise what you plan to do with the funding
- Make sure you include the main activities and describe how you will deliver them

13. How do you know there is a need for your activity? (approx. 500 words)

Please describe any evidence you have gathered e.g.:

- *The success of any previous work you have done*
- *Any consultation you or others doing similar work have carried out with the people we who would benefit*
- *Research you or others have completed to show there are gaps in provision or a need to enhance existing services*

A large, empty rectangular box with a thin black border, intended for the user to write their response to question 13. The box is currently blank.

14. Why is your proposed activity the best way to meet the needs you have identified? (approx. 300 words)

Tell us what evidence you have to show this is the best way of meeting the need.

Examples of the types of evidence you might use are:

- *Learning from your own work*
- *Learning from similar activities delivered by other organisations*
- *Independent research into the effectiveness of a particular approach*
- *Results of consultation*

15. Who will benefit from your activity? (approx. 500 words)

Tell us about the people, communities or organisations that will benefit from your project. Beneficiaries could be all the people, communities and organisations living in a geographical area or all those with similar interests or needs.

16. If you were successful in receiving the funding what key outcomes/outputs are you seeking to achieve over the next 12 months?

i) Outcomes - We call the key changes or differences an activity will make activity outcomes. If your activity will result in two key changes then all you need do is list those two outcomes. Giving two or three will not in anyway reduce your application's chance of success so don't be tempted to add unnecessary outcomes just to fill the box. In each outcome, tell us who will benefit from the change.

To help you with this section here is an example:

The objective of an activity is to: Provide Health and Well Being sessions for young parents

Outcomes would be – *Parents gain an increased understanding of nutrition / parents gain skills to prepare healthy meals for their families.*

Outcomes:

Outcome 1	
Outcome 2	
Outcome 3	
Outcome 4	

- ii) *Outputs - Outputs can include services you offer or facilities you provide. They are what you 'put out' as a result of your activity.*

Using the health and well being sessions example above:

An output would be – 10 health and well being sessions held

Giving two or three will not in anyway reduce your application's chance of success so don't be tempted to add unnecessary outputs just to fill the box.

Outputs:

Output 1	
Output 2	
Output 3	
Output 4	

- 17. What would be the consequence if the Council did not provide the funding you have applied for? (approx. 400 words)**

18. How will you make sure your organisation can deliver the outcomes / outputs you have listed above? (approx. 500 words)

We want to know about your ability to deliver successfully. This may include:

- *Your organisation's experience of delivering similar work*
- *Your staff and management committee's relevant skills and expertise and what training and/or development opportunities have been accessed*
- *The support you will need from other organisations or partners*

- 19. How do you feel the grant could impact opportunities for people to use and promote the Welsh Language (positive or negative) and if in any way it treats the Welsh Language less favourably than the English Language? How could positive impacts be increased, or negative impacts decreased?**

Part Five – Financial Information

20. How much are you requesting from Neath Port Talbot County Borough Council (NPTCBC) and what percentage is this of the total cost of the activity?

Full cost	Amount requested from NPTCBC's Third Sector Grant Fund	% of the full cost requested from NPTCBC
£	£	%

21. Will the funding applied for attract additional resources into the County Borough?

Yes No

If yes please provide further detail

22. Other sources of funding if not 100% of full cost requested as part of this application

Funding Source:	Confirmed Yes / No	Amount
Eligible reserves that will be used to fund the activity		
Business income		
Donations		
Fundraising		
Business Sponsorship		
Grant funding secured (please itemise)		
Funding being applied for (please itemise)		

23. Please provide details of all grants from NPTCBC or other publicly funded assistance received within the last 3 financial years (this information is required under the new UK Subsidy Control rules):

Financial Year 2022/23, 2023/24, 2024/25	Type of Grant	Amount (£)

25. Please provide evidence of insurance for the following types of insurance that your organisation has in place.

The evidence should include the name of the insurers, policy numbers, expiry date, and limits for any one incident. Please complete the table below and *provide copies of relevant insurance certificates.*

	Employers liability insurance	Public liability insurance	Property insurance (including contents)
Name of insurers			
Policy numbers			
Expiry dates			
Limits for any one incident			

26. Declaration

As a duly authorised representative for and on behalf of the organisation named below, I hereby certify that all information provided to the Council in this Application Form is complete and accurate in all respects.

Signed:.....

Name:

Position:.....

Duly authorised representative

For and on behalf of:

Date: