

Nithsdale Sports Grants Application for Individuals for one year (2021/2022)

For our use only

Date received	
Reference	

Please read the Guidance, Criteria and Information document before you start.

If you would like some help understanding this information or need the documents in another format please contact: NithsdaleSportsGrants@dumgal.gov.uk

If you are under 16 years old, an adult should fill in this application on your behalf.

Section 1 – About you

1.1 Please give your full name.

1.2 Who is the primary contact for this application? We will contact this person about your application, and they should also sign the declaration in Section 6. If you are under 16 years old, your parent or guardian should give their details here and sign the declaration in Section 6 on your behalf.

Your title (please tick): Mr Mrs Miss Ms Dr Other

Your name:

Your address
and postcode:

Your daytime or
mobile phone number:

Your e-mail address:

We prefer to contact you by email. If you have provided an email address above, please tick to confirm that you check the mailbox regularly.

1.3 In which activity are you especially talented?

Sport Please tell us which one in the box below.

1.4 What is the name of your sporting event, project or activity for which you need funding?

2.3 How are you funding the remainder of your costs?

Please note you can only apply to one Dumfries & Galloway Council funding source for the same purpose in any financial year.

Source of other funding	Amount available or applied for (£)	Has this been confirmed? (Please put 'Yes' or 'No').	If 'Yes', please give the date this was approved. If 'No', please give the date you expect a decision.
Total	£		

Please ensure the total of your other funding (question 2.3) added to the amount you are requesting (question 2.2) equals your total costs (question 2.1).

Section 3 – Background information

Each of your answers in Section 3 should be no more than one or two paragraphs.

3.1 If you are under 16 years old, tell us your age. The contact person named in question 1.2 should be your parent or guardian, and they should also sign the declaration in Section 6 of the form on your behalf.

3.2 If you are 16 years old or over, are you:

in full-time education or training?

employed full-time?

employed part-time?

doing something else?

Please tell us what in the box below.

3.3 Tell us the highest level you have achieved to date in your chosen activity.

3.4 What do you need the money for? If you need funding to attend an event, please say where it will be taking place. Send us any information you have about your project, event or activity with this form. What will our support help you achieve and how will you benefit?

3.5 Tell us how you see your chosen activity developing within the next 12 months.

3.6 Why do you need financial help from us? Tell us about your circumstances, in particular anything which affects your ability to achieve your aims. Tell us if you or your parent or guardian receive any benefits.

3.7 Use this section to tell us anything else about your application. Describe any fundraising activities you carry out. Provide details of anything else you have done to raise money for your activities, such as holding events, getting sponsorships and donations, or contributing money from your own savings or income. Tell us about any achievements, events, training or competitions you have taken part in that are relevant to your application. Mention any local, national or international organisations that you are a member of.

Section 4 – Checklist

You should keep a copy of the filled-in, signed application and any documents to support your application in case you need them in the future.

Please tick the appropriate boxes below.

The contact person named in question 1.2 has signed the declaration in Section 6.

I have enclosed the supporting documents listed below.

Section 5 – Bank details

You **do not** need to answer this question if you are applying to a sports council.
Give details of the bank or building-society account we should pay your funding into. We prefer to make payments electronically (by BACS), so we need your account details to do this.

Name of bank or building society:	<input type="text"/>		
Address of bank or building society:	<input type="text"/>		
Sort code:	<input type="text"/>	Account number (if you have a bank account) or roll number (building-society account):	<input type="text"/>
Account name:	<input type="text"/>		

Section 6 – Declaration

Make sure that you understand the conditions of the following declaration before you sign it.

- As far as I know, the information in this form is true and accurate. I understand that it may be a criminal offence to receive funding after giving false information, in which case you will cancel the funding and claim back any money I have received. I agree that you can check, with others, the information on this application form and any supporting documents. If you award funding based on the information in this form, I confirm that the activities I carry out will be as described in this form. I agree that you, or your appointed agents, can examine any documents necessary to show that the activities have been carried out. I will meet all your funding conditions shown in the award letter you send me.
- I agree that if there are any changes in the activities not agreed in writing with you, or if the activities do not go ahead for any reason, you can claim back all or part of any funding you have paid, as appropriate.
- **I agree that if my application is successful I will acknowledge your funding contribution in all correspondence and publicity associated with the funding, including letterheads, websites, e-mails etc. I will use your logo preceded by the words, “Supported by”.**
- I agree that you may make the information I have given on this form available to the public, and you may use it for publicity purposes.

The contact person named in answer to question 1.2 of this form should sign and date the application.

Please give the full name of the applicant as at question 1.1.

Please make sure you sign in blue ink so we can clearly see this is an original signature.

Your signature:

Date:

Your name (please print):

Data Protection Notice

Dumfries and Galloway Council acts as Data Controller for the purposes of the Data Protection Act 1998. We are fully registered under the Act and ensure we comply with the protections the Act affords you. This notice explains how the information you supply will be used, and how you can remove it from our records. Please read this carefully.

How will the information we collect be used?

We require you to provide certain information so that we can adequately assess your funding application. We may also wish to pass your details to others who have specialist knowledge required to deal with your application. So that we can do this we may be required to pass your details to third parties who carry out these services for us.

May we share your personal details with our partners as part of our scoring process?

Yes No

We may also wish to use your information to send you marketing information. This may include information on programmes, services, and products we provide such as seminars and training opportunities that may be of interest to you. If you would like to receive marketing information, please indicate your preferred format for the marketing communications. Please tick the relevant box (es):

Telephone Mail Email Do not contact

We would also like to use your information to customise our products and services to serve you better, by providing more tailored products and services and to help us understand your needs better e.g. through internal research, data analysis and market research. So that we can do this we may pass your details to other parties who carry out surveys, questionnaires and customer evaluations for us. If you would like to be contacted for market research in the following formats please tick the relevant box (es):

Telephone Mail Email Do not contact

We would also like to pass your details to others who we feel may be able to provide you with information or services which may be of use to you. If you would like to receive marketing information from our partners in the following formats please tick the relevant box (es):

Telephone Mail Email Do not contact

How you can request that information about you is removed

If at any time you wish your details to be removed from our database please contact Nithsdale Active Schools & Community by e-mail: NithsdaleSportsGrants@dumgal.gov.uk When you contact us please tell us your full name and your address including postcode.

Please email your form and documents to:

NithsdaleSportsGrants@dumgal.gov.uk