

Big Lottery Fund



Stage 1 of 2 Data Capture Form (with Dev)

ZAPP_STAGE_ONE_OF_TWO_IGL v2.05 2016_06_30_0930

Form reference: 78E3B51D12DC1EE99A85B7679D5759B8

About your organisation

Please check the details we hold about your organisation (highlighted in blue). Are they still correct?*

☐ Yes

☒ No

If you selected 'No' in error, select 'Update details', below, but don't make any changes.

Would you like to update the details below or enter the details of a different organisation?*

☒ Update details

☐ Different organisation

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

Awenek Studio C.I.C

Does your organisation use a different name in your day to day work?*

☐ Yes

☒ No

What is the main or registered address for your organisation?*

Postcode*

PL10 1DP

Find Address

Occupant

Sub-building name

Sub-building number

Building name

P O Box

Building number

Address 1

Address 2

Address 3

Address 4

Town or city

Postcode

1

Lower Anderton Road

Millbrook

Torpoint

PL10 1DP

What is the main telephone number for your organisation?

Country United Kingdom

Phone Number

What is the main email address for your organisation?

This should be the email address people use to contact your organisation

awenekstudio@gmail.com

Does your organisation have a website?*☐ Yes☒ No**What type of organisation are you?***

Select your organisation type from at least one of these categories?

Charity

Company or mutual society

Public sector

School

Other

Community Interest Company - Limited by Shares

Give any reference or registration numbers you have.

Charity Commission for England and Wales

Charity Commission for Northern Ireland

Office of the Scottish Charity Regulator

Companies House

Financial Services Authority

Health Authority number

School reference number

Other reference or registration number

Please give details:

What is your VAT status?*

- ☐ VAT registered
- ☒ Not VAT registered

When was your organisation set up?*

Give the date when your organisation adopted its current legal status.

Day Month Year

Is your organisation a branch or department of a larger organisation?*

- ☐ Branch or Department
- ☒ Independent

What is your organisation's current financial position?*

Select one option and fill in the amounts from your accounts or projection.

- ☒ Information from the latest accounts approved by your organisation.
- ☐ 12 month projection because you've been running less than 15 months.

Accounting year ending*

Day

Month

Total income for the year (£)*

Total expenditure for the year (£)*

Surplus of deficit at the year end (£)

Total savings or reserves at the year end (£)*

Have your accounts been independently audited?*

- ☒ yes
- ☐ no

Does this programme require bank details?*

☐ Yes☒ No**Who should we contact if we have questions about your application?**

They must be someone who runs or works for your organisation. We need their date of birth and home address for our standard fraud prevention checks.

Please check the details we hold about you (highlighted in blue). Are they still correct?*

☐ Yes☒ No

If you selected 'No' in error, please select 'Update details' below and make no changes.

Would you like to update your details below or enter the details of a different person?*☒ Update details☐ Different person**Title*****Forenames*****Surname*****Date of Birth***Day Month Year **Job or position*****Home address****Postcode*****Occupant****Sub-building name****Sub-building number****Building name****P O Box****Building number****Address 1****Address 2****Address 3****Address 4****Town or city****Postcode****Have they lived at this address for the last three years?***☒ Yes☐ No

daytime phone*

Evening phone

Mobile phone

Email

The email address should be the one they use for your organisation. We'll use this whenever we get in touch about your project.

Communication needs*

If you have any other communication needs, please give details.

Which language would you like us to use whenever we get in touch with this contact?*

[WALES & UK PROGRAMMES ONLY]

☐ Welsh

☒ English

Please select the country of the contact's address(es) and telephone number(s).

Telephone Number

Address

Please select the address for all project-related correspondence*

Main organisation address

Does this programme require a secondary contact?

☐ Yes

☒ No

About your project

What would you like to call your project?*

Give your project a short title, something we can use in publicity.

You can write up to 70 characters (including spaces).

Awenek Studio CIC

Character count: 0

What does your project involve?*

Summarise what you plan to do, using straightforward language.

You can write up to 4,000 characters (about 600 words).

To further develop the activities for engaging with local communities within the Rame Peninsula, neighbouring Torpoint and Plymouth. The grant will allow us to fund a full-time post to 'test and learn' what people want and need to help them reach their full potential. We wish to test offers which include creative arts, mindfulness, wellbeing and other activities to reach the widest range of people of all ages.

Character count: 0

When are you planning to start and finish your project?*

your start date must be after the date when we'll tell you our decision.

Start date* Day Month Year

Finish date* Day Month Year

How will people benefit from your project?*

please provide at least one outcome:

Outcome 1:

Outcome

Outcome 2:

Outcome 3:

Outcome 4:

Outcome 5:

Outcome 6:

Where will your project take place?*

Give the location of the places where your project will happen.

- If your project will take place at (or be run from) a single location, enter its postcode, put 100 per cent and select it as the main location.
- If your project will take place at (or be run from) a number of locations, add more rows and estimate a percentage for each one. Then select one postcode as the main location.
- If the location doesn't have a postcode, use one for a nearby building.
- For Heroes Return and International programmes, only one project location should be entered and this should be the correspondence address

You can enter up to 20 locations in the table. If there are more than this select the top 20.

Building name (or number) and street*	Postcode*	% per location*	Main location*	
Cornwall	PL10 1LA	100	<input checked="" type="checkbox"/>	Remove
Add row	Total	100		

Development Grant Budget

How much will it cost to develop your project?*

The development or feasibility costs you can ask us for are explained under **What else do I need to know?** at the beginning of the form.

- Include the costs of everything you will need to do to develop your project, even if you're not asking us to fund it.
- Only include VAT if you can't recover it from HM Revenue and Customs.
- If you're asking us for all the costs make sure the total cost and amount from BIG is the same.

	Total cost (£)	Amount from BIG (£)
Development costs	20,495	20,495

Beneficiary Monitoring

Does this require beneficiary monitoring?*

☐ Yes

☒ No

Legally Responsible Contact & Declaration

Who in your organisation will be legally responsible for the funding?

They must be over 18 years old and they can't be the same as the person we should contact if we have questions about your application. We need their date of birth and home address for our standard fraud prevention checks.

- For companies they should be a director or the company secretary.
- For schools they should be your head teacher.
- For local authorities and health bodies they should be your chief executive or a director.
- For town, parish or community councils they should be the clerk to the council.
- For all other types of organisations they should be your chair, vice chair or treasurer.

Title*

Forenames*

Surname*

Date of Birth*

Day Month Year

Job or position*

Home address

Postcode*

Have you been able to find the correct address?

☒ Yes☐ No

Occupant

Sub-building name

Sub-building number

Building name

P O Box

Building number

Address 1

Address 2*

Address 3

Address 4

Town or city

Postcode*

Have they lived at this address for the last three years?*

☒ Yes☐ No

daytime phone*

Evening phone

Mobile phone

Email

The email address should be the one they use for your organisation. We'll use this whenever we get in touch about your project.

Please select the country of the contact's address(es) and telephone number(s).

Telephone number

Address

Communication needs*

If you have any other communication needs, please give details.

Which language would you like us to use whenever we get in touch with this contact?*

[WALES & UK PROGRAMMES ONLY]

☐ Welsh

☒ English

☒ Tick here to confirm declaration completed and to perform pre-upload validation checks..

Attachments

You can attach files up to a total of 8MB. The total size of all your attachments is 0MB

Add File

Open File

Remove File

Check individual attachment sizes

The total size of all attachments in bytes is:

For office use only: