

**This application is for supporting volunteering in the following rural DEA areas in Derry City and Strabane District Council Area.**

**⦁ Derg ⦁ Faughan ⦁Sperrin**

 **\*Please note it is advisable to read the guidance notes before applying\***

 **VOLUNTEERING PROGRAMME**

**1st Nov 2020 – 31Mar 2021**

 **APPLICATION FORM**

**This form should be completed by the principal contact person for this application**

1. Name and address of organisation:

|  |  |
| --- | --- |
| Name of Organisation |  |
| Contact Person |  |
| Address |  |
| Post Code |  | Contact number |
| Email  |  | Website |
|  Where is your organisation located | Derg  | Faughan | Sperrin |
| Social media platforms  | Please list the social media you use for your organisation |
| GDPR Regulations | I give permission for the details on this application to be stored with NWVC and shared with 3rd parties i.e. funder requirements DCSDC / DfC if applicable. Please delete as applicable Yes / No |

|  |  |  |
| --- | --- | --- |
|  Do you have a constitution in place? | Yes  | No |
| Are you registered with the NI Charities Commission If yes please provide your Charity number\* | Yes  | No |
|  |

. \*Organisations who are not registered with the NI Charities Commission are still eligible to apply

1. Please provide a brief list of your organisation’s main activities:

|  |
| --- |
| . |

1. How many volunteers are currently involved in your organisation including committee members?
2. In what way are volunteers supporting people in response to Covid-19?
3. How as an organisation do you support your volunteers?
4. **The maximum grant you can apply for is £500**. **Minimum £250.**

Outline below how you will allocate the grant applied for:

|  |  |
| --- | --- |
| **Volunteer Expenses** |  |
| Travel \*(38p per mile as per DfC guidelines) | £ |
| Volunteer subsistence | £ |
| PPE (Protective clothing for volunteers) | £ |
| **Support for Building Volunteer Capacity** |  |
| Volunteer training | £ |
| Governance e.g. Access ni disclosures for volunteers | £ |
| Other (please provide details that demonstrates building volunteer capacity) | £ |
|  |  |
| **TOTAL GRANT APPLIED FOR**  | **£** |

1. **Bank Details.**

|  |  |
| --- | --- |
| **Account Name:** |  |
| **Bank/Building Society Name:** |  |
| **Bank/Building Society Address:** |  |
| **Sort Code:** |  |
| **Account Number:** |  |

1. **DECLARATION -** We confirm that the information in this application is correct and, if successful, we will comply with all requirements of the Volunteering Programme.

|  |  |
| --- | --- |
| **Name** | **Signed** |
| **Position** | **Date** |

1. **Checklist** - The following documents must be attached to your application

|  |  |  |  |
| --- | --- | --- | --- |
| Constitution |  | Last Bank Statement |  |

**Return to:** **Jacqui@volunteeringnorthwest.co.uk** **or Post to**

**NWVC, 22 Bishop Street Derry/Londonderry, BT48 6PP**

**Closing Date Friday 29th January 2021**