**SUPPORTING COMMUNITY INITIATIVES APPLICATION FORM**

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| cshanahan@ntdc.ie |

**Please Submit Application To:**

 **Details**

|  |  |
| --- | --- |
| Name of Social Enterprise: |  |
| Contact Person and Role: |  |
| Contact Address: |  |
| Contact Telephone: |  |
| Contact Email: |  |
| Tax Reference Number: |  |
| Tax Access Number: |  |
| Current insurance in place: | Yes/No |

 **Details**

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| **Please give a brief description of your organisation (including number of staff), it’s current activities and client group below:** |
|  |

 **Details of proposed expenditure**

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| **Summary of proposed equipment/refurbishment/training/event planned (as per criteria list)** |
|  |
| **Outline of need for this item/refurbishment/service?** |
|  |
| **What difference will this make to the delivery of services to your organisation’s client group/or to the achievement of its social, environmental or economic objectives:** |
|  |
| **Approximate number of beneficiaries as a result of this project?** |

|  |  |
| --- | --- |
| **Total cost of equipment/service/training /other:** | **Capital: €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Service: €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Training: €\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Other: €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Amount being sought under this application:** | **€** |
| **Amount of co-funding and its source, for any balance of expenditure:** | **€** |
| **Have you received SICAP funding before?** |  |
| **Has an application for funding for this project ever been sought or approved from other sources? YES/NO** |  |
| **If YES to above, please specify from what source it was requested and if funding was provided.** |  |

Please note that if this application is successful your organisation will be required to supply the following information prior to payment being made by North Tipperary Development Company. The following mandatory evidence/documentation will be required:

1. Signed Copy of Funding agreement.
2. Current Tax Clearance.
3. Insurance: The Recipient Organisation shall show evidence of insurance and in the case of capital items being purchased or improvement works they must show evidence of insurance policy being updated to include same.
4. Recipient Organisation shall submit a financial report on expenditure, with associated backup (invoices, receipts, bank statements, quotations).
5. A brief report with photos where relevant must be submitted on completion of the project.
6. Any publicity (Newspaper/Website/Social Media etc.) must reference NTDC SICAP funding support.

**What is a social enterprise - applications must be a social enterprise as outlined below.**

1. Is an enterprise whose objective is to achieve a social, societal or environmental impact, rather than maximising profit for its owners or shareholders.
2. Pursues its objectives by trading on an on-going basis through the provisions of goods and/or services.
3. Reinvest any surpluses into achieving social objectives.
4. Is governed in a fully accountable and transparent manner and is independent of the public sector.
5. If dissolved, it will transfer its assets to another organisation with a similar mission.

**Declaration**

I confirm that the organisation which I represent- (if at start up stage, please confirm that the planned enterprise will operate as below)

|  |  |
| --- | --- |
| Is an enterprise whose objective is to achieve a social, societal or environmental impact, rather than maximising profit for its owners or shareholders. | Please tick here to confirm \_\_\_\_\_\_\_\_\_ |
| Where at least part of its income is earned from trading activity on an on-going basis through the provisions of goods and/or services. | Please tick here to confirm \_\_\_\_\_\_\_\_\_ |
| Is governed in a fully accountable and transparent manner and is independent of the public sector. | Please tick here to confirm \_\_\_\_\_\_\_\_\_ |
| Where the surplus is primarily re-invested in the social objective | Please tick here to confirm \_\_\_\_\_\_\_\_\_ |
| If dissolved, it will transfer its assets to another organisation with a similar mission. | Please tick here to confirm \_\_\_\_\_\_\_\_\_ |

**I declare that the information provided by me on this application form is truthful and complete.**

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Position in Organisation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The deadline for receipt of completed applications is* ***close of business, 30 June 2021.***

* *  *The Social Inclusion and Community Activation Programme (SICAP) 2018-2022 is funded by the Irish Government through the Department of Rural and Community Development and co-funded by the European Social Fund under the Programme for Employability, Inclusion and Learning (PEIL) 2014-2020.*