

**ECT Transport Fund**

**Grant Application Form**

1. **Introduction** 
   1. Ealing Community Transport (“**ECT**”) has been providing community transport services that positively benefit the local communities for over 35 years. With operations based in Greenford, ECT’s community-based door-to-door services help keep disabled, isolated and/or lonely people independent and mobile, as well as less isolated and lonely.
   2. ECT’s community transport services provide transport to local communities in a way that delivers a public benefit by supporting participation, engagement and enabling people to have more opportunities in their lives. For instance, earlier this year ECT launched its **Elderly Accessible Service in Ealing** project (“**EASIE**”) which provides transport solutions to reduce loneliness and isolation amongst the older population in Ealing. Further, ECT is supporting the London Borough of Ealing’s **Charter to End Loneliness and Isolation**.
   3. As part of this commitment to delivering a public benefit, ECT constantly seeks innovative ways to work with local partners to provide local communities with safe, affordable and accessible transport that responds to their needs. As such, ECT has launched the **ECT Transport Fund** **to help support organisations create social opportunities for isolated individuals through local accessible community transport options. The Fund will give local community groups the opportunity to bid for transportation funding that will stimulate community activities.**
2. **Detail on ECT’s Transport Fund**
   1. What is ECT’s Transport Fund?

The Fund provides successful applicants with a credit of up to **£1000** to offset the cost of transport provided by ECT (which includes a driver if you need one, vehicle hire and fuel costs). To be eligible to apply, applicants must be a community and/or voluntary group which provides community-based activities.

* 1. Who does the Fund benefit?

The Fund is available to:

* **established organisations** who need support in meeting the **transport costs** associated with **new or additional group activities**; and
* **new emerging organisations** who want to start group activities that require transport and need support in meeting these **transport costs**.

Please refer to section 2.5 below on the eligibility criteria required in order to be considered. Please also note that all successful organisations will need to become a member of our Group Transport Service prior to receiving transport under this Fund. Please refer to our website for more information on how to register:

<http://ectcharity.co.uk/services/areas/ealing/group_services_for_non_profits#view>

* 1. What service will a successful applicant receive?

ECT will provide successful applicants with one or more of its iconic green minibuses. If required, this can include a professional, uniformed driver who has been trained to the Minibus Driver Awareness Scheme (MiDAS) standard and is trained in first aid. Alternatively, successful applicants can nominate their own driver(s), provided that they have completed MiDAS training.

* 1. Where and when can a successful applicant travel?

Successful applicants can use ECT’s transport service to travel anywhere in the UK. The transport provision must be between:

* 10am and 2pm Monday to Friday during term time;
* after 6pm Monday to Friday during term time;
* anytime Monday to Friday during school holidays; and/or
* anytime at the weekends.
  1. Who can apply?

Organisations may only apply if they meet the criteria set out below. Whilst we will consider all applications on their merits, we particularly welcome applications from organisations that provide new social opportunities for lonely and isolated people.

**EITHER** (one or more must apply):

* your project is non-profit making;
* your organisation is a voluntary organisation with a constitution or governing document;
* your organisation is a community group

**AND** (one or more must apply):

* the transportation aspect of your project is not currently benefiting from existing grant funding;
* you are providing a new/additional service

**AND** (one or more must apply):

* you are based within London Borough of Ealing;
* have members in the London Borough of Ealing;
* you are assisting people/residents in the London Borough of Ealing.
  1. How to apply

If you meet the criteria set out at paragraph 2.5 above and wish to apply to the Fund, please fill out the Application Form on the next page and return it:

* **either by** **post** to ECT Transport Fund, Ealing Community Transport, Greenford Depot, Greenford Road, Greenford Middlesex UB6 9AP
* **or by email** to [info@ectcharity.co.uk](mailto:info@ectcharity.co.uk).

We will consider applications on a rolling basis.

**ECT TRANSPORT FUND APPLICATION FORM**

**Please return the completed application form either by** **post** to Anna Whitty, Ealing Community Transport, Greenford Depot, Greenford Road, Greenford Middlesex UB6 9AP **or by email** to [info@ectcharity.co.uk](mailto:info@ectcharity.co.uk). We recognise that some sections of this application form may not be relevant to your particular organisation or group. If you are unsure of your eligibility for the Transport Fund or would like to discuss your application in advance of submission, please don’t hesitate to contact **Lucy Wells** on **020 8813 3210** to discuss your particular circumstances.

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| **SECTION 1**: Main Contact | |
| Please provide details of the main contact for this grant application. We will contact this person with any questions about your application, and inform them of our funding decision. It is important that they are contactable from 9am-5pm Monday to Friday. | |
| **Name** |  |
| **Role** |  |
| **Telephone** |  |
| **Email** |  |

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| **SECTION 2**: About your Organisation | | | |
| **Organisation name** |  | | |
| **Address** |  | | |
| **Telephone number** |  | | |
| **Email address** |  | | |
| **Website** |  | | |
| **Facebook username** |  | | |
| **Twitter username** |  | | |
| **Charity and/or Company number** |  | | |
| **Is your organisation a local branch of a national/larger organisation?** | Yes 🞏 No 🞏  If yes, please specify: | | |
| **Is this application being made on behalf of a coalition, or as a partnership?** | Yes 🞏 No 🞏  If yes, please give details: | | |
| **When was your organisation set up?** | Month: Year: | | |
| **What was your organisation’s income in each of these years (or since your organisation started if it is less than 3 years old)?** | 2015/16 | 2014/15 | 2013/14 |
| £ | £ | £ |

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| **About your organisation (please tick all that apply)** | | |
| **Type of organisation**: | **Profile of organisation**: | |
| 🞏 Charitable | 🞏 Arts | 🞏 Under 8s |
| 🞏 Voluntary | 🞏 Club | 🞏 Children |
| 🞏 Community | 🞏 Education | 🞏 Youth |
| 🞏 Statutory | 🞏 Health | 🞏 Adult |
| 🞏 Non profit-making business | 🞏 Housing | 🞏 Elderly (60+) |
|  | 🞏 Religious | 🞏 Disabled |
|  | 🞏 Social activities | 🞏 Ethnic minority |
|  | 🞏 Social services | 🞏 Isolated/lonely |
|  | 🞏 Sport |  |
|  | 🞏 Uniformed |  |
|  | 🞏 Women/girls |  |

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| **Do you have any of these policies/checks?**  Please indicate ‘yes’, ‘no’ or ‘not relevant’ against each policy/check listed.  You do not need to attach copies of these policies at this moment but we may ask you for evidence at a later stage. | **Policy / Check** | **Yes / No / Not relevant** |
| Safeguarding policy |  |
| Equal opportunities / diversity policy |  |
| Disclosure and barring checks |  |
| Health and safety policy |  |
| Public Liability Insurance |  |
| Employer’s Liability Insurance (including cover for volunteers) |  |

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| **How many people are involved in your organisation?** | **Role** | **Number** |
| Volunteers and helpers |  |
| Full time paid staff |  |
| Part time paid staff |  |

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| **SECTION 3**: Budget Breakdown | | |
| **Please provide a breakdown of ALL the transport costs, including for your proposed activity, based on the charge rate enclosed. Please don’t hesitate to contact ECT for further guidance on rates.** | | |
| **Item** | **Total Cost (£)** | **Amount requested (£)** |
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| **Total** |  |  |

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| **If this grant will not cover the total cost, how will you make up the rest of the money?** | | | |
| **Source** | **Amount (£)** | **Applied (Y/N)** | **Has a decision been made re the application?** |
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| **Total** |  |  |  |

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| **SECTION 4: Proposal** |
| **1. In no more than 350 words, please describe your organisation’s purpose/activities and beneficiaries** |
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| **2. In no more than 750 words, please tell us about your proposed activity requiring transportation and for which you are requesting grant funding. Please include the following details:**   * start and end dates; * the geographical area(s) that your work will reach; * whether the activity is new or builds on existing work; * purpose or overall aim of your project; * specifics of when transport will be required (i.e. destinations and period of use, expected number of passengers, whether a wheelchair accessible vehicle is required); * any partner organisations that you will work with and what you’ll work on together; * if you are planning to nominate your own driver, please tell us the training, support, and information you offer to your volunteer drivers, including any relevant qualification and/or entitlements they hold; * help us to understand the context for your proposal by telling us why this activity is needed and what difference the activity will make; and * how will carrying out this activity help your organisation meet its own goals. * details of any fees charged to your passengers for using your service (if applicable). |
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| **3. In no more than 500 words, please tell us why your organisation is well placed to carry out this activity (tell us about your knowledge, network, skills, experience).** |
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| **4. In no more than 350 words, please tell us about your beneficiaries, including who will benefit from this activity and social impact created by your initiative.** |
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| **5. In no more than 350 words, please tell us how will you measure the social value of the difference this activity will make?** |
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I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being the authorised representative of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the organisation)

confirm that the information given in this application is correct and that the project/organisation is not established or conducted for profit.

I undertake to inform ECT of any changes in the organisation’s circumstances that would affect this application.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_