Heart of Bucks COMMUNITY FOUNDATION

SOCIAL INVESTMENT LOAN APPLICATION FORM

1. Name of organisation	

2. Full address (Correspondence)

Address	
Postcode	
Email	
Telephone	
Website	

3. Contact details – give details of the main contact for your organisation

Title	Miss ☐ Ms ☐ Mrs ☐ Mr ☐ Other
Name	
Position	
Telephone	
E-mail	
Address (if Different from Org)	

4. Please describe the main aims and activities of your organisation

Buckinghamshire Council

This programme operates with the support of Buckinghamshire Council

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5. What is the structure of your organisation? (Please tick all those that apply)

Date org. established		Community Interest Co	
A registered Charity	Yes ☐ No ☐	Charity number	
A registered Company	Yes ☐ No ☐		
Applying for charitable status	Yes ☐ No ☐		
Other (please state)			

6. If your organisation is a part of a larger regional or national organisation please provide details

7. Please give details of any Quality Standards you currently have or are working towards

8. How many people are involved in your organisation?

Number of full-time paid staff/workers:		Number of trustees or on management committee:	
Number of part-time paid staff/workers:		Number of volunteers and helpers (excl trustees):	
Number of members if appropriate:			

9. Please list the names of your Trustees/Directors and their relationships to each other

10. Please tell us how your organisation's financial controls include a clear 'segregation of duties'. This is usually a system of dual-authorisation for online banking and dual-signatories for cheques. The Charity Commission defines segregation of duties as "A key feature of internal financial controls is to ensure that no single individual has sole responsibility for any single transaction from authorisation to completion and review."

11. Please list the names of your bank account signatories and their relationships to each other

12. How much money are you applying for?
(loans are available from £1,000 - £25,000)

£

13. Please describe how you would use the proposed loan funding. Please attach quotations for the work and/or a budget sheet for your project if appropriate.

14. Please indicate below your preferred schedule of loan repayments

Repayment Period: (over what period could you repay the loan?)

1 Year	☐	4 Years	☐
2 Years	☐	5 Years	☐
3 Years	☐	Other	

Repayment Frequency: (how often could you make repayments?)

Monthly	☐	Annual	☐
Quarterly	☐	Other	
Six-monthly	☐		

15. Please explain how you will raise the funds to repay this loan? Please provide any relevant evidence, e.g. previous track record of fundraising activity or a project plan

16. Please say how your community will benefit as a result of this loan?

17. Please select one of the following impact categories which is most suitable for your project.

- ☐ Advance people's physical and mental health, wellbeing and safety
- ☐ Connect people with the arts, culture and heritage
- ☐ Improve life skills, education, employability and enterprise
- ☐ Promote reduction of isolation and disadvantage and access to local services
- ☐ Transform access to, and engage with, the environment and public spaces
- ☐ Maximise ability to strengthen community cohesion and build social capacity

18. In which area of Buckinghamshire do the beneficiaries of this loan live?

19. Declaration

I am authorized to make this declaration on behalf of my organisation.
I agree to use the loan solely for the purpose set out in this application form and to comply with any terms and conditions of the loan award. I agree to participate in monitoring, auditing and evaluation related to this loan and to provide evidence of expenditure of the loan when requested to do so by Heart of Bucks.

Name	**Signature**
Position in Organisation:	**Date**:

Heart of Bucks will record the details you have entered on this form on our database to enable us to administer your application and will contact you using the information provided.

If you are happy to receive other emails from Heart of Bucks in future with information about our funding programs and events please tick here: ☐

Please return the completed, signed application form together with:

- A copy of your governing document
- Signed copies of your annual accounts for the last three financial years
- Cash-flow forecast
- Budget/project plan if appropriate
- A recent bank statement with your organisation's name, address, sort code and account number
- A copy of your Health & Safety policy
- A copy of your Equal Opportunities/Equality & Diversity policy
- A copy of your Safeguarding policy
- Planning permission if appropriate

By post to:
Heart of Bucks, 2nd Floor, 59 Walton Street, Aylesbury, Bucks, HP21 7QG

Or scan and email to: Grants@heartofbucks.org

What happens next?
If we have any questions about your application we will contact you within two weeks. Otherwise we aim to let you have a decision on your application within four weeks.