Please note, groups can only have one funded event/activity, however, can be part of applications made by other organisations.

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| --- | --- | --- |
| **1.** | **Name and full address of community group/organisation:** |  |
| **2.** | **Name of key contact:** |  |
| **3.** | **Email address:** |  |
| **4.** | **Telephone Number:** |  |
| **5.** | **What event/activity are you planning to celebrate Windrush Day 2019? (in no more than 500 words)** |  |
| **6.** | **How will your event/activity meet one or more of the following objectives? (in no more than 300 words)*** **Explain to communities what Windrush Day is;**
* **Promote positive messages regarding Windrush Day;**
* **Promote awareness of the Historical, Economic and Cultural content of the Windrush generation to Communities;**
* **Have an Educational aspect relating to Windrush;**
* **Involve Windrush elders;**
 |  |
| **7.** | **How will you promote your event/activity?** |  |
| **8.** | **Where and when are your activities going to take place?*****(Please note, your event/activity should be on or around Windrush Day – 22nd June, 2019)*** |  |
| **9.** | **Total Project Cost:** |  |
| **10.** | **Amount requested from this** **funding:*****(Please note, each of the Community Cohesion regions has a maximum of £5,000 for events/activity)*** |  |
| **11.** | **Have you applied to any other funding bodies for funding towards this event/activity?*****(Please note, we cannot fund an event/activity which is being funded from another source)*** |  |

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| **Bank or Building Society Details**If your application is successful the money requested will be paid into your organisation’s host bank account. Please provide details below:  |
| **Name and address of Bank:** |  |
| **Bank Account Number** |  |
| **Sort Code** |  |

**Funding will be paid in arrears. All successful applications will be required to monitor activity funded and return a Project Completion Form by 31st July 2019 before funding will be released.**

Name (Print clearly)………………………………………….. Position ……………………………….

Signature :…………………………………………………… Date: …………………………………..

**Please send your completed application form via email to:** **sian.sanders@cardiff.gov.uk** **no later than 5pm on Thursday 18th April, 2019.**

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| **For office use only:**Date application received by Regional CC Co-ordinator …………………………………………...Date of panel meeting …………………………………………………………………………………..Date of decision to applicant …………………………………………………………………………… |