









# Together Fund NDSO Application Form

## Organisation Information

Organisation Name Enter the official name of the applicant organisation. This should match exactly with their governing document and Companies House / Charity Commission where appropriate.			
Contact Name Contact within your organisation for this project.			
Email Address We will use this to contact you about this application.			
Has your organisation received investment through a previous round of Tackling Inequalities Fund?	Yes	No	
How much has this organisation received through Tackling Inequalities Fund in the past? (£)  If you are unsure or have not received an previous award, enter 0			
Organisation Postcode Enter the postcode for the organisation's main office / delivery venue. This must be a full postcode.			
Organisation Type Choose from the dropdown list. If you select 'other', please make a note of the type in the 'Additional Comments – Partner' box (final question).			
Is the organisation a registered charity or company?	Charity	Company	Neither
Charity Commission Number Use this tool if you are unsure: https://register-of-charities.charitycommission.gov.uk/charity-search			
Companies House Number Use this tool if you are unsure: https://find-and-update.company-information.service.gov.uk/			
Organisation Website Enter full web address for the organisation. Enter N/A if you don't have a website.			
Social Media Which is the main social media platform used by your organisation?			
Please provide a link to the social media account you refer to above			











# Delivery

Main Beneficiary Delivery Postcode Please enter the main beneficiary delivery postcode, if you have multiple delivery sites, this could be the same as your organisation postcode Please ensure capital letters & a space between the outward code (initial 2-4 characters) and inward code (final 3 characters) e.g AB12 3CD	
Active Partnership Which Active Partnership is your project being delivered in? Use this tool to find the Active Partnership if you are unsure: https://dominicwoodfine-postcode-lookup-app-q4vxtz.streamlitapp.com/	
Project Purpose(s) Select the purpose/s which are relevant to this project. Select all that apply.	Organisational survival Direct Project Delivery Resilience Support Work Other (please state below)
If other, enter the project's purpose	
Project Description Provide details on the purpose of funding for the recipient organis Please refer to the '6 questions' when completing this section	ation and what the intended outcomes are.











#### Beneficiaries

Expected Participant Numbers  How many people are expected to be supported to be more active counting each person only once? If you don't have a precise figure, please provide an estimate.	
Beneficiaries Select the groups who will benefit from this project	Culturally diverse communities  Disabled people  Lower socioeconomic groups  People with long term health conditions  Faith communities  LGBTQ+ people  Migrants  Older people  Younger people  Women and girls
Other Please let us know who your beneficiaries are if they do not belong to any of the groups listed above?	Other (please state below)  If Other Beneficiaries, please specify below*
Main Beneficiaries Of those selected above, which group will at least 75% of you beneficiaries fall into? (Please note, this is not a condition of funding but helps with our reporting).	Culturally diverse communities Which culturally diverse communities would benefit from the project?  Black / African / Caribbean / Black British Mixed Asian / Asian British Other culturally diverse community Arab Jewish Gypsy, Roma and Traveller Communities Other ethnic group (please state)
	Disabled people Which disabilities do the beneficiaries of the project have?  Behavioural  Learning  Physical  Sensory  Social  Other disability (please state)  Lower socioeconomic groups  Lower socioeconomic groups











	People with long term health conditions Which long term health conditions do the beneficiaries of the project have?
	Mental health condition
	Physical health condition
	Other long term health condition (please state)
	None of the above
	None of the above
	Other Main Beneficiaries*
	Faith communities
	LGBTQ+ people
	Migrants
	Older people
	Younger people
	Women and girls
	Other (please state below)
If Other Main Beneficiaries, please specify	











## Purpose

Total proposed investment (£) Round to the nearest pound eg 397	
Budget Breakdown	
Budget for Equipment Hire/Purchase (£)	
Budget for Coaches Fees/Expenses (£)	
Budget for Hire of Facilities (£)	
Budget for Promotion / Publicity (£)	
Budget for Staff Costs (£)	
Budget for Transport / Travel (£)	
Other Expenditure Try to describe each expense concisely Separate each expense by hitting ENTER or creating a new line	
Provide some more specific budget breakdow Provide a breakdown of the total costs eg Staff Costs total is £240	vn here ) – 12 hours x £20
Project Start Date	
Project End Date	











Additional Comments  Add any further information here which is relevant to the application, but has not been covered elsewhere. You may wish to note if the work is also with another Active Partnership or will be used cross-borders or regionally.

We will always store your personal details securely. We'll use them to administer your application and communicate with you. We will share information on this form with trusted partners, including Sport England who are administering this funding or if we are required to do so by law. For full details see our Privacy Policy at <a href="https://www.wheelpower.org.uk/privacy">www.wheelpower.org.uk/privacy</a> and <a href="https://www.smartsheet.com/legal/privacy">https://www.smartsheet.com/legal/privacy</a>.