



Ref:

<u>Dundee Partnership</u> <u>Community Regeneration Fund</u>

Grant Application 2025/26

| | Applicant Information | |
|-------------------------|-----------------------|-------------|
| Name of Applicant Group | WMZU - Whitfield | Donally Com |
| Activity Title | Sume turps | tonging and |
| Grant Requested (£) | Secretary 1 | |

- The Youth Inclusion Fund is to provide financial assistance for community initiatives aimed at working with Children and Young People. Applications should be for an activity (or activities) focused on including children & young people in activities, diverting young people from an existing undesirable activity or preventing them joining in with such activity. This should reflect a need that children and young people have been consulted on.
- The Small Grants Fund is for other applications that contribute towards achievement of the Dundee City Plan / Local Community Plan, usually up to £5,000, but there may be lower local restrictions on the amount. Therefore, it is important to check with the relevant Community Worker as listed on page 8 for any local restrictions or other requirements.

This application should address needs in one of the below Wards within which the Dundee Partnership supports activity. If an activity covers more than one Ward then an application is required for <u>each</u> Forum, but it is essential that each application can stand on its own if agreed and that the application is <u>not</u> for a citywide activity, but a local activity that is to take place in more than one Ward.

| | WARD WHERE YOUR OT WILL OPERATE |
|---------------|------------------------------------|
| Coldside | |
| East End | |
| Lochee | |
| Maryfield | |
| North East | X |
| Strathmartine | |

| PLEASE INDICATE WH YOU ARE API | IICH TYPE OF GRANT PLYING FOR |
|-----------------------------------|----------------------------------|
| Small Grant | |
| Youth Inclusion | |

Please note that communications regarding this application will be sent to you via email unless you indicate otherwise. All communication for this application should be made to dundee.partnership@dundeecity.gov.uk

Checklist for the DP Community Regeneration Fund Application Form

Before submitting your application form to the Dundee Partnership Team, please use the below checklist to ensure that your form is as fully completed as possible. Please also note that submitting an incomplete form can cause delays in processing or rejection of your application.

| lave you: | |
|---|----|
| Read the guidance sections of the form | |
| Fully completed the information on the front of the form | |
| Provided a response to all sections of the application form (including indicating a section as 'N/A' where relevant) | |
| Checked that your budget adds up properly? | |
| Checked that your start date is after the date at which funds could be available, (see page 6) and that your end date is within the financial year? | |
| Included appropriate, measurable outputs & outcomes? | |
| Provided your groups accounts, or other appropriate financial information? | NA |
| Sourced and attached all relevant quotes? (multiple quotes are required where >£5,000 is being applied for to ensure value for money is being considered) | e |
| Checked that the bank details or financial code are correct / complete? | |
| Signed the form, given accurate contact details and ticked the GDPR box? | |
| | |

| Who is the grant for? (Name of Applicant Group / Department) | What | matters | to yo | ou whith | eld. |
|--|--------------|--------------|----------|----------|---------------------|
| Did you receive a Dundee Pa (If yes, list all grants below) | artnership (| grant during | 2024-25? | | YES / NO |
| Title of project fund | ed | Amount g | ranted | When | Was it fully spent? |
| 34 - | Ш | 5 10 | | V) | |
| | 11 | | - 10 | | |
| | | | - 0 | 11 7 | 1 |
| | | 10. | | | 185 75 |
| | | 535 | | | |

Please give a description of what you want this grant for - (please limit your answer to 500 words or less)

This grant will go towards the cost of two summer trips, to give those in the Community a chance to have something to Look forward to as a group in the area that has a high precentage of children living in poverty. The cost of Living affects these families emmencely and this group allows those who attend to mix with others and engage in the Local Community.

Which City Plan / Local Community Plan Outcome(s) will it address?

Cost of Living, Creating a safe activity for those

empowering communities.

Health & Wellbeing Children & families

appear

| Littow many people will benefit from this project? | |
|---|-----------|
| Will any specific groups benefit from this project? (male, female, age range or characteristic) | protected |
| Many Local families which will include | 10 |
| _ | ne |
| 21 adults and 32 children | |
| | |

Please say why the project is needed (please limit your answer to 500 words or less)

With the cost of living rising it is becoming more and more unaffordable to do a variety of activities during the holidays. This project is essential to providing framilies with the opporunity to experience places they might not get to otherwise. Its we live in an area with a high SIMD index this allows us to target those families to increase better mental health and equally for all.

What local consultation has taken place regarding this application?

(Please attach evidence summarising the results of any consultation)

We came logether at duchally and agreed this is

gomething we would like the todo. This was then followed up by a meeting regarding funding application and a vote to the parents:

What evidence do you hold that the local community supports this application?
(For example, was it proposed by members of a particular group? Does it directly address need identified by community members?)

Parents discussed how they would like summer hips that the kids might not get to experience. We all voted on which trips. Living in an SIMD

and health & wellbeing to those community members

How will the project / activity tackle deprivation or benefit those experiencing deprivation?

(Refer to Section 1 of the Guidance Notes)

This is a hindamental project for families experiencing deprivation as we chose venues that our community wouldn't typically have the opportunity to go to due to location and costs. It empowers the community to help alliviate barriers and reduce isolation. The project provides physical as well as mental stimulation to improve health and wellbeing.

| What other sources of funding have you secured / tried to second funding have you secured / tried to second funding please state why this is the case (Detail below, including applications that are pending or that have for further evidence of an application for other funding) This is our first time every applications. | | | n. We may ask |
|--|---------------------------|---------|-----------------|
| Source of Funding (detail if this funding is for more than 1 year, if applicable) | 33 | 10. | £ |
| | | | |
| What are the costs of your activity and how much money is details (expand list / use an additional sheet if required) and provid applications for over £5,000 is to provide three quotes to ensure value we will require to see these where relevant). | de all audi | toe lan | ad acastics for |
| Cost Heading | Full Co | osts | DP Aid |
| Course For Indones and the stable | (£) | | (£) |
| Connie Fox indoor + outdoor kids | £841 | | 841.53 |
| Connie Fox indoor + outdoor adults | £179 | | 179 74 |
| Wonderworld admissions (Mids + Adults) | £319. | 40 | 319.40 |
| Coaches courie for | | | |
| Coaches wonderwardol | | | Assembly E |
| | | | |
| | | | |
| Totals | | | |
| | | | |
| All applicants are required to submit a copy of the group's rewith this application. These will be used to help determin WITHOUT THEM AN APPLICATION WILL NOT PROCEED If reserves held are less than three months operating expensions Note that if you have already submitted your accounts within this finanot be needed - please check with the Dundee Partnership Team if | e eligibili ses please | ty for | funding, and |
| What other documents are you attaching to evidence the budge (e.g. quotes, estimates, projected income and expenditure) | et costs f | or this | application? |
| How do you intend to monitor the project Outputs and Outcome Feedback, athendance, protections | | | |
| | | | |
| What is the planned start date of the event/activity? Please note turn around on applications is 6 - 10 weeks and funding cannot be retrospective (see section 2 of the guidance notes) | | sVJ. | |
| What is the planned end date of the event/activity? | SV | m / | tigus |
| | | | () [|

Outputs & Outcomes

It is expected that applicants will have evidence to support performance information when completing returns on the performance against target. Consideration of this should be given when outputs and outcomes are set out.

Applicants will usually refer to one <u>City Plan</u> / <u>Local Community Plan</u> Outcome, but the opportunity is given for up to two, if required. **Please refer to section 3 of the Guidance Notes** for examples of outputs and outcomes / indicators.

| ife chances for children ¿ families - NMZI | o improve |
|---|----------------|
| Purpose of activity / project within this Outcome: | |
| lü | Target 2025-26 |
| Outputs | |
| Trip for 53 (oral people (families) | 53 |
| Outcomes / Indicators: | |
| 1 San Carried Sulpers Chan | 53 |
| eaduce financial cost are summer | _53 |
| renod for 53 | |
| City Plan / Local Community Plan Outcome: | |
| Purpose of activity / project within this Outcome: | |
| | Target 2025-26 |
| | Target 2025-26 |
| Purpose of activity / project within this Outcome: | Target 2025-26 |
| Purpose of activity / project within this Outcome: | Target 2025-26 |
| Purpose of activity / project within this Outcome: | Target 2025-26 |
| Purpose of activity / project within this Outcome: Outputs | Target 2025-26 |