**EXPRESSION OF INTEREST**

Wigtown Area Committee has allocated funding to key priority areas for 2024/25 which it seeks Expression of Interest from delivery partners to lead on the delivery of these projects.

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| **Key Initiative** | **Detail** | **Budget** | **Expression of Interest submission deadline** |
| **Christmas Decorations and Community Events**Expressions of interest are sought from local organisations organising events at Christmas or any other time of the year.  |  Ardwell | £300  | **12 July 2024** |
| Glentrool | £300 |
| Monreith | £300 |
| Mochrum | £300 |
| Port Logan | £300 |
| New Luce  | £300 |
| Cairnryan | £300 |
| Sorbie | £300 |
| Lochans | £300 |
| Whaphill | £300 |
| Kirkinner | £300 |
| Dunragit | £300 |
| Isle of Whithorn | £300 |
| Castle Kennedy  | £300 |
| Garlieston | £300 |
| Stoneykirk | £300 |
| Kirkcolm | £300 |
| Drummore | £300 |
| Sandhead | £300 |
| Kirkcowan  | £300 |
| Carsluith | £300 |
| Creetown  | £495.20 |
| Leswalt | £507.60 |
| Portpatrick | £508.40 |
| Glenluce | £552.80 |
| Portwilliam | £543.60 |
| Wigtown  | £665.40 |
| Whithorn  | £669.80  |
| Newton Stewart  | £1,000 |
| Stranraer  | £3,000 |
| **Festivals and Events**  | Expressions of Interest are sought for the running of festivals and events up to £1K.  | £7,500 | **On-going until all funds are dispersed** |

Our Council is keen to empower local community and voluntary groups that have an interest and expertise in the delivery of these priority areas, and we are therefore seeking Expressions of Interest from appropriate organisations to support the delivery of the event/activity.

Organisations must have a constitution, bank account and have satisfactory verified Annual Accounts for the last year.

Successful organisations will have a named Council Officer who will be their main contact person and will offer support, including with monitoring information, which will take the form of an Annual Report on what was delivered, how this benefitted your community and the outcomes achieved. Elected Members should be involved in an appropriate way at your event/project.

Please let us know of your interest by completing the following information and returning it to GrantApplications@dumgal.gov.uk by the dates specified in note below. You will then be advised of the outcome/next steps of your Expression of Interest.

To discuss these opportunities or the process, please contact **Gillian Collins** Ward Officer – email: Gillian.Collins@dumgal.gov.uk mobile 07765335471

**Section 1 – About you and your organisation**

|  |  |
| --- | --- |
| **Organisation Name:** |  |
| **Organisation Type:** | SCIO/CHARITY/CIC/UNINCORPORATED |
| **Any Registration Number(s):** |  |

**Please send a copy of your Signed Constitution and most recent verified Accounts with this form**

|  |  |
| --- | --- |
| **Contact Name:** |  |
| **Email Address:** |  |
| **Telephone Number:** |  |

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| **Please indicate which Priority Area you are interested in delivering** |  |
| **How much funding from the Priority Area Budget do you require?** | £ |

**Section 2 – Finance**

**Please provide details of the total costs and headings you expect to deliver your project/activity. Volunteer or in-kind costs should NOT be included here.**

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| --- | --- |
| **ITEM** | **COST** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL** | **£** |

**Please give details of any other financial contributions being made towards the total cost of your project/activity, including external funding and any contribution from your own funds**

|  |  |  |
| --- | --- | --- |
| **SOURCE OF FUNDING** | **AMOUNT** | **CONFIRMED/DATE?** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL** | **£** |  |

**Section 3 – Your application in detail**

**Please tell us, in approximately 500 words or less, what our funding will pay for and what exactly will be delivered. This section will be used in reports to summarise your project/activity.**

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**Please tell us, in approximately 500 words or less, what experience and expertise your organisation has in relation to delivering this type of project/activity.**

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**Please tell us how many people you estimate will benefit from your project/activity.**

|  |  |
| --- | --- |
| Actively involved in volunteering to deliver the project/activity |  |
| Directly benefit from the outcomes of the project/activity |  |

**Section 4 – Organisation’s Bank details**

Give details of the bank or building-society account we should pay your funding into. We prefer to make payments electronically (by BACS), so we need your account details.

|  |  |
| --- | --- |
| **Name of bank or building society:**  |  |
| **Address of bank or building society:** |  |
| **Account Name:** |  |
| **Account Number:** |  | **Sort Code:** |  |

**Section 5 – Declaration – MUST BE SIGNED BY TWO PEOPLE**

**Make sure you understand the conditions of the declaration and that you have the appropriate authority from your organisation to sign it. The main contact named in question 1 must sign part 1 of the declaration. Another person who is a member of your organisation and who is not related to the main contact must sign part 2 of the declaration.**

* As far as we know, the information in this form is true and accurate. We are authorised by the organisation to make this application and sign this declaration on their behalf. We understand that it may be a criminal offence to receive funding after giving false information, in which case you will cancel the funding and claim back any money we have received. We agree that you can check, with others, the information on this application form and any supporting documents. If you award funding based on the information in this form, we confirm on behalf of the organisation that the activities we carry out will be as described in this form. We agree on behalf of the organisation that you, or your appointed agents, can examine any documents necessary to show that the activities have been carried out.
* We confirm that our organisation has its own UK based bank or building society account in the legal name of the organisation applying.
* We agree on behalf of the organisation that if there are any changes to the activities not agreed in writing with you beforehand, or if the activities do not go ahead for any reason, you can claim back all or part of any funding you have paid, as appropriate.
* We agree that if the application is successful, we will acknowledge your funding contribution in any publicity.
* We agree that the information given in this form can be used for contact purposes, and non-personal information given may be made available to the public and may be used for publicity purposes.

**Please give the name of your organisation as in question 1**

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**Part 1 - The main contact named in question 1 must sign in blue ink so we can clearly see this is an original signature.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |
| **Print Name:** |  |
| **Position in Organisation:** |  |

**Part 2 - A member of the applying organisation who is not related to the main contact named in question 1 must sign in blue ink.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |
| **Print Name:** |  |
| **Position in Organisation:** |  |