

**Cleveland Unit for the Reduction of Violence (CURV)**

Funded Interventions

Application Form

**Project/Initiative Title:**

**Author:**

**Date:**

**Completed applications should be emailed to** [**pcc.office@cleveland.police.uk**](mailto:pcc.office@cleveland.police.uk) **Details provided within this application form may be published on the PCC website at** [**www.cleveland.pcc.police.uk**](http://www.cleveland.pcc.police.uk)

**Section 1 – Basic bid information**

**Contact details:  
Please make sure that this person knows all aspects of your project and is able to talk about it if required.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title: |  | First Name: |  | Last name: |  |

|  |
| --- |
| Role/Position in organisation: |

|  |  |
| --- | --- |
| Organisation Name: |  |

|  |  |
| --- | --- |
| Organisation Address: |  |

The Fund is intended to help communities to respond to the challenges around knife crime, and in

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|  |  |
| --- | --- |
| Postcode: |  |

|  |  |
| --- | --- |
| Telephone: |  |

|  |  |
| --- | --- |
| Email address: |  |

|  |  |
| --- | --- |
| Website: |  |

**In case of a joint bid, please list all organisations and agencies involved.**

|  |  |  |
| --- | --- | --- |
| **Organisation Name** | **Organisation Address** | **Contact name and details** |
|  |  |  |
|  |  |  |
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**How would you best describe your organisation?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Registered Charity |  |  | Registration Number: | | |  |
| Voluntary or community organisation/group | |  | | | | |
| Self-help group/forum | |  | | | | |
| Company limited by guarantee | |  | | | | |
| Social Enterprise | |  | | | | |
| Local Authority | |  | | | | |
| Other | |  | | If other, please specify: |  | |

**Aims and objectives of your organisation(s)**

**Please provide a summary of your organisation(s) aims and objectives (in no more than 300 words):**

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**Section 2 – Strategy Statement**

**Please provide a brief description of your proposed initiative or service that meets the requirements as set out in the guidance document (in no more than 300 words).**

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**Which geographical area(s) will benefit most from your initiative for which this application relates?**

**(Please tick all boxes which apply)**

Redcar and Cleveland  Stockton-On-Tees

Middlesbrough  Hartlepool

**Stakeholders  
Who will benefit from the proposed initiative or service (in no more than 300 words).**

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**Will this application be used to support or enhance other services that you intend to deliver? (in no more than 300 words?**

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**Section 3 – Financial information**

**Funding requested**

|  |  |
| --- | --- |
|  | (Total funding requested) |

**Funding period and payment schedule**

|  |  |
| --- | --- |
| **From:** | **To:** |
|  |  |

**Payment schedule (single payment, quarterly etc)**

|  |
| --- |
|  |

**Bid elements**

|  |  |
| --- | --- |
| **Service/Initiative** | **Amount requested** |
|  | **£** |
|  | **£** |
|  | **£** |
|  | **£** |
| **Total funded requested** | **£** |

**Joint bid elements (if applicable)**

|  |  |
| --- | --- |
| **Service/Initiative** | **Amount requested** |
|  | **£** |
|  | **£** |
|  | **£** |
|  | **£** |
| **Total funded requested** | **£** |

**Exit Strategy – Are you seeking to secure alternative funding for future longevity, or to have plans to scale down your proposal effectively if required post funding period? (in no more than 300 words)**

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| --- |
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**Section 4 – Performance Criteria**

**What are the expected outcomes and performance measurement criteria to be used (including as appropriate indicators/measures)?**

**In addition to the measures you outline below there will be a requirement for successful bidders to work with the CURV team, including its evaluation partner.**

|  |  |
| --- | --- |
| **Measure / Indicator** | **Outcome expected** |
|  |  |

**Section 5 – Governance, Reporting and Communications Plans**

**How will you oversee delivery of your project / initiative and ensure effective delivery and reporting to the CURV team against the outcomes / targets set out above (in no more than 300 words).**

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**Privacy Notice**

The information you have supplied in this form will be used to process your funding application. In order to make a decision on your application, some of the de-personalised information provided may go into a public decision report. In addition, your application form may be shared with third parties and partner agencies who may be involved in the decision-making process or whom can verify specific facts within your application.

We may be required to disclose information outside of the Office of the Police and Crime Commissioner for Cleveland to help prevent fraud, or if required to by law.

We may not be able to process your application if you do not provide all the requested information.

Successful applications will be retained for a maximum of 6 years (plus current year). Unsuccessful applications will be retained for 6 months from the date the applicant was notified. Information will be securely retained on the computer systems used by staff in the Office of the Police and Crime Commissioner.

I give the Office of the Police and Crime Commissioner permission to store the information provided within this application and to share this information with the recipients listed above, where there is a need to do so.  
  
Print name: Date:

**Transparency/Open Data**

If your application is successful, general details of grants will be published on the Office of the Police and Crime Commissioner for Cleveland’s website: <https://www.cleveland.pcc.police.uk/Decisions/Decisions-of-the-PCC.aspx>.

No personal information will be published.

**Declaration**

I certify that all the particulars given in the form are correct and that any grant money received from the Police and Crime Commissioner for Cleveland will be used for the purposes stated in this form. The Police and Crime Commissioner for Cleveland reserves the right to reclaim any grant not used for the purposes stated on this form.

I understand that the grant applied for is for this financial year only and that any grant provided will not be provided on an on-going basis in future years.

I agree to provide a report detailing the outcomes of this project/activity (a form will be sent out for completion at the relevant time) if our application is successful and will acknowledge Cleveland Unit for the Reduction of Violence (CURV) in any publicity relating to the project.

Please tick here to accept the above declaration:   
 ***Note: Your application will not be processed if this box is not checked.***