



East Ayrshire
COUNCIL

For official use only

Organisation
Onthank Men's Club

Reference Number
CG4734

grant assessment form

1	Aims and objectives of the organisation	To meet the social, leisure and recreational needs of men in the North West of Kilmarnock by developing a leisure based programme, fostering community spirit and reducing the effects of social exclusion.
2	Purpose of the grant (including breakdown of costs)	Annual cost of hall hire £480.00
3a	How many people are on the organisation's Management Committee?	4
3b	What is the organisation's total membership?	27
3c	How many members usually attend the organisation's meetings or events?	20-27
3d	How many members of the organisation would benefit from the grant?	All
3e	How many members of the community would benefit from the grant?	27
4	How will the grant :- (a) develop the organisation; or (b) benefit the local community.	<p>It will allow the group to continue to run the group for another year.</p> <p>It creates an opportunity for any retired or unemployed men in the community to socially interact with other men.</p>

All questions on this form must be completed

5	Total cost of project		£ 480.00
	Amount of grant requested		£ 480.00
	Bank Balance(s)	Date 30/11/10	£ 475.78
	Where the group has more than one bank account all balances should be recorded		
	Cash in hand	Date	£
Value of any other financial assets		Date	£
Name of other funding sources			

n/a

Amount and date of grant

£	Date

6 **If latest balance (including other financial assets) exceeds the cost of the project or is substantial, are these funds ring-fenced for the normal activities of the group or can they contribute to the cost of the project?**
 Ring-fenced for the normal activities of the group and to go towards the annual trip cost.

7 **Recommendation**

Support	<input checked="" type="checkbox"/>
Refuse	<input type="checkbox"/>
Defer	<input type="checkbox"/>
Amount	£480

Recommended

Reason for recommendation
 This will allow the group to continue to meet in their local area.

Management Risk Ranking	L <input checked="" type="checkbox"/> / M / H	Child Protection Risk Ranking	L <input checked="" type="checkbox"/> / M / H
Risk Ranking based on Grant Application and Financial Information used to determine appropriate levels of monitoring and evaluation.		Applications with a HIGH ranking are not recommended for support	

8 **If there are any revenue implications how will they be met in future years?**

9 **Does the project represent value for money?** Yes No

10 **Cross boundary grant (if applicable) and division per committee (the calculation should identify the corresponding number of individuals within the respective Local Committee areas who will directly benefit from the grant award)**

	Nos	Amount	%
Northern Local Grants Committee	2	£33.60	7
Central North Local Grants Committee	22	£393.60	82
Central South Local Grants Committee	3	£52.80	11
Southern Local Grants Committee			
Other areas outwith EA			
Method of Division			

All questions on this form must be completed

Grant Assessment Form (Background Information)

11	Date of officers contact	27/01/11		
12	Type of Contact		Telephone ✓	
13	Are you satisfied that the details in the application are accurate?	Yes ✓	No	
	If no give reasons			
14	Is the proposal a realistic undertaking for the group?	Yes ✓	No	
15	Has the Risk Management Assurance Statement at Section 28 been signed?	Yes ✓	No	
16	Are the appropriate planning permissions/building warrants in place for the project (if applicable)?	n/a		
17	If the project involves improvements to premises or requires possession of land, is the applicant the owner or tenant (on a lease of 5 years or more)?			
	Please note this is a condition of grant	Owner	Tenant	Other
18	Does the organisation cater for children under 16?	Yes	No ✓	
	If yes, is it registered as Day Care for Children under the Regulation of Care (Scotland) Act 2001 with the Care Commission?	n/a		
	If no give reasons			
19	Does the expenditure meet the grant funding criteria as set out in the conditions of grant?	Yes ✓	No	
	If no give reasons			
19a	Does the organisation provide organised and supervised service/ activities for children and/or young people under 18 years of age	Yes	No ✓	
19b	If yes, is the organisation registered with CRBS, Disclosure Scotland or with a recognised umbrella body?	Yes	No	
19c	If no, is the organisation currently in the process of registering with CRBS, Disclosure Scotland or with a recognised umbrella body?	Yes	No	

All questions on this form must be completed

20 **What Council Strategy/Community Planning/Local Committee priorities are addressed by the application?**

EAC Community Plan:
Improving Health and Wellbeing

21 **Please indicate with a tick the benefit in kind given to the organisation**

<input type="checkbox"/>	Reduced minibus charges	<input type="checkbox"/>	Reduced photocopying charge
<input type="checkbox"/>	Reduced equipment use charge	<input type="checkbox"/>	Free typing
<input type="checkbox"/>	Reduced letting charge	<input type="checkbox"/>	Free use of premises
<input type="checkbox"/>	Other	Please specify	

22 **Please indicate by a tick the level of officer involvement**

<input type="checkbox"/>	High	<input type="checkbox"/>	Medium	<input checked="" type="checkbox"/>	Low	<input type="checkbox"/>	None
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23

Assessing Officer	Kevin Mitchell	Designation	Lifestyle Development Officer (Men's Health)
Department	Health	Tel No	01563 578160
Signature	<i>Kevin Mitchell</i>	Date	27/1/11
Countersigning Signature	Eddie Bulik	Date	10 February 2011
Designation	Administration & Monitoring Officer		

For completion by Administrative Officer

Previous grant awarded	31/3/10 – Grant of £480 Hall lets 31/3/10 – Grant of £655 Xmas Dinner
Other relevant information	

All questions on this form must be completed