



grant assessment form

1

Purpose of the group

To develop more extended relationships between staff, parents and others associated with the school and to engage in activities which support and advance the education of the pupils attending it. Also aiming to provide facilities that are not normally provided by East Ayrshire Council (or the local education authority).

2

Purpose of the grant

To fund PTA activities including :

- Christmas selection boxes for all children attending St. Matthews Primary.
- Catering, band and hiring of hall for St. Patrick's Day Dance.
- DJ and tuck shop for valentines dance.

All proceeds from these events will be used to benefit the children of St. Matthews Primary.

3a

How many people are on the group's Management Committee?

21

3b

What is the group's total membership?

21

3c

How many people in the group would benefit from the grant?

246

3d

How many people usually attend the group?

12

3e

How many people are expected to attend?

246

4

How will the grant develop the group/organisation or benefit the local community?

The grant will allow the development of a good parent / teacher relationship and will allow the children to be socially included within their community.

| | | | | | |
|-------------------------------------|--|----------|--|---------------------------|-------------------------------------|
| 5 | Total cost of project | £ 2010 | 6 | Recommendation | |
| | Amount of grant requested | £ 1407 | | Support | <input checked="" type="checkbox"/> |
| | Bank Balance(s) Date 12/11/03 | £ 789.79 | | Refuse | <input type="checkbox"/> |
| | Where the group has more than one bank account all balances should be recorded | | | Defer | <input type="checkbox"/> |
| | Cash in hand Date 06/10/03 | £ none | | Amount Recommended | £ 500 |
| Name of other funding source | | | Reason for recommendation | | |
| | | | This level of grant will help to fund the | | |
| Amount and date of grant | | | selection boxes for the Christmas Party & | | |
| £ | Date | | the St. Valentines Disco. No provision is | | |
| | | | made within this figure to support the St. | | |
| | | | Patrick's Day dance which is aimed at | | |
| | | | adults and is a fundraising event. | | |
| | | | | | |
| | | | | | |

7 **If latest bank balance 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?**

The money in bank is ringfenced for the Halloween parties and a sum of £603 will be used towards the selection boxes and dictionaries for all school leavers. It is also hoped to purchase a new video recorder for the school.

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

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

N/A

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)**

| | | | | | |
|--|------------------|--|--------------------|--|--------------------------------------|
| <input type="text"/> | Cumnock Area | <input type="text" value="81"/> £164.43 | Kilmarnock Central | <input type="text"/> | Northern Area |
| <input type="text"/> | Doon Valley | <input type="text"/> | Kilmarnock South | <input type="text" value="9"/> £18.27 | Other areas outwith East Ayrshire |
| <input type="text" value="70"/> £142.10 | Irvine Valley | Method of Division | | | |
| <input type="text" value="86"/> £175.20 | Kilmarnock North | <input type="text"/> | | | |

All questions on this form must be completed

Grant Assessment Form (Background Information)

| | | | | |
|----|--|--|-------------|--------|
| 11 | Date of officers contact | 11/12/03 | | |
| 12 | Type of Contact | Visit | Telephone ✓ | Letter |
| 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 | Does the group have insurance for the project? | Yes ✓ | No | |
| 16 | Are any planning permissions/building warrants required for this project? | Yes | No ✓ | |
| 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 eight? | Yes | No | |
| | If yes, is it registered under the Children Act 1989 | Yes | No | |
| | If no give reasons | | | |
| | | | | |
| | | | | |
| 19 | Does the expenditure meet the grant funding criteria | Yes ✓ | No | |
| | If no give reasons | | | |
| | | | | |
| | | | | |
| 20 | What Council Strategy/Social Inclusion/Local Committee priorities are addressed by the application? | | | |
| | It will allow the children of the school to be socially included having a Christmas party and the teachers and parents to be active citizens within their local community. | | | |
| | | | | |

All questions on this form must be completed

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 |
|--------------------------|------|--------------------------|--------|-------------------------------------|-----|--------------------------|------|

23

| | | | |
|---------------------------------|-------------------------------|--------------------|------------------|
| Assessing Officer | Michelle Ferguson | Designation | Community Worker |
| Department | Educational & Social Services | Tel No | 01563 535913 |
| Signature | | Date | 12/12/03 |
| Countersigning Signature | Alan Murray | Date | 12/12/03 |
| Designation | Team Leader | | |

For completion by Administrative Officer

Previous grant awarded

Other relevant information

All questions on this form must be completed