**Sefton Council Community Transition Fund**

**Equality and Diversity Events Funding**

**Application Form**

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| **Organisation** |  |
| **Contact name** |  |
| **Address** |  |
| **Telephone number** |  |
| **Email address** |  |

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| **Project Name** |  |

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| Please provide a short description of your organisation and the type of work it does |
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| Please describe your event – what do you want funding for? |
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| What date on the Council’s EDI Calendar will your event be linked to? |
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| **What area will your event be delivered in (eg specific area, borough wide)?** |
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| **How do you know there is a demand for this event – what research/consultation have you done?** |
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| **How does your project fit the EDI Events Fund criteria and contribute to the Council’s Core Purpose?** |
| |  |  | | --- | --- | | **Priority Area** | **Project contribution** | | Protect the most vulnerable |  | | Facilitate confident and resilient communities |  | | Commission, broker and provide core services |  | | Place-leadership and influencer |  | | Drivers of change and reform |  | | Facilitate sustainable economic prosperity |  | | Generate income for social reinvestment |  | | Cleaner and Greener |  | | Collaborative working for the benefit of Sefton’s communities |  | |
| **What do you hope your event will achieve (ie outcomes)?** |
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| **Who else are you /will you be working with to develop and deliver the event?** |
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| How much funding do you need? Please provide a breakdown of costs. |
| |  |  | | --- | --- | | **Item** | **Amount** | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | | **Total Amount** |  |   **If you are requesting a contribution towards a bigger project, what is the total cost of the project?** |
| **Have you already secured any match funding for this event?**  **What other funders have you previously applied to?** |
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| **Have you previously held an event to mark this date? Please give details.**  **Have you previously held any other events to mark other dates? Please give details.** |
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Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Please return completed applications to:**  Paul McCann  Sefton MBC  Communities  2nd Floor Bootle Town Hall  Trinity Road  Bootle  L20 7AE  Email: [paul.mccann@sefton.gov.uk](mailto:paul.mccann@sefton.gov.uk)  Telephone: 0151 934 3202 |