|  |
| --- |
| **North Somerset Together (NST) Network Volunteer Fund Application** |
| This form is for organisations seeking regular or one-off funding for the support of local people and volunteers in response to the Coronavirus (COVID-19) outbreak through VANS / Quartet Funding. Please email completed forms to **info@vansmail.org.uk**for the attention of Claire Payne |
| **Organisation Name:** |  |
| **Your Name:** |  | **Role Title:** |  |
| **Organisation Email Address:** |  |
| **Organisation Contact Number:** |  |
|  **North Somerset Together (NST) Network Volunteer Fund Criteria:** |
| **Your organisation must:** |
| * Be providing support directly benefitting local residents who are in need during Coronavirus
 |[ ]
| * Be either volunteer led or volunteer supported
 | **☐** |
| * Have a UK bank account
 | **☐** |
| * Be unconstituted (as at 1st April 2020)
 | **☐** |
| * Not already be in receipt of a grant of £2,500 or above from the Quartet NSCP Fund, or a grant from the Quartet Express / Response Grant Fund
 | **☐** |
| * Not have a regular source of income that could provide volunteering or care package costs
 | **☐** |
| * Be part of the North Somerset Together Network, or be able to provide evidence of Covid-19 Relief efforts benefitting local people who are in need
 | **☐** |
| * Fully complete and return the claim form on a weekly basis where a claim is being made
 | **☐** |
| * Provide receipts (or copies) for all claims, except volunteer mileage
 | **☐** |
| * Only claim for volunteer related costs, food / care parcels
 | **☐** |
| * Pre-agree any other costs with VANS in advance of submitting a claim
 | **☐** |
| * Retain any original receipts until at least June 2021
 | **☐** |
| * Not be a Parish or Town Council. Quartet welcome funding bids directly from Parish and Town Councils
 | **☐** |
|[ ]  **I confirm that I have read and understood the application criteria.****This organisation meets the requirements as stated above.** |
| **Signature:** |  | **Date:** |  |
| **Bank Details for receipt of funds** | **Sort Code** |  |  |  | **Account Number** |  |  |  |  |  |  |  |  |
| **Account Name:** |  |