

**DRAYTON PARISH COUNCIL**

[www.draytonpc.org](http://www.draytonpc.org)

**LEISURE AND VOLUNTARY GRANT APPLICATION FORM**

**DETAILS OF APPLICANT:**

1. Name of organisation/applicant: Clean Slate  
Contact Details: Nadia Brown.  
The Chapel, Building 572 Brice Road, Upper Heyford, Oxon, OX25 5TE  
01869 232461
2. Position in organisation: Project Manager

**DETAILS OF ORGANISATION:**

3. State briefly the purpose and objectives of your organisation  
The purpose of Clean Slate is to provide support to adult victims of sexual, physical and emotional abuse in Oxfordshire. We aim to empower these people with skills that help them cope with daily life while dealing with the emotional struggles of their past.
4. How is your organisation run? Elected committee
5. How long has your organisation been running? 8 years
6. How often do you have meetings? Quarterly

**DETAIL OF ACCOUNTS:**

7. Do you have a bank/building society account? YES

If YES please give the following details (grants will be paid by BACS where possible):

Account Name: Clean Slate

Sort Code: 51-70-15

Bank Name and Address: Natwest – Bicester Brance

Bank Account Number: 78594499 1 Manorsfield Rd, Bicester, OX26 6EH

8. Please attach the most recent balance sheet and statement of audited accounts for your organisation. If you are unable to do so please explain why. (For second and subsequent application these must be provided)

**DETAILS OF MEMBERSHIP:**

9. How many people regularly take part in your organisation activities? 60
10. Of these how many take part (a) as members  
(b) as recipients - 60
11. Give an indication of how many of the members/recipients fit into the following age/gender groups:-

Male 0-16 -	Male over 16 - 12
Female 0-16 - 2	Female over 16 - 46
12. Please give an approximate number of how many members/recipients are residents of Drayton or how many residents of Drayton benefit from your activities:- 3
13. Are there restrictions on membership or participants in your organisation? Yes  
If YES please give details: Must be victims of abuse

14. Do you charge a fee for membership/entrance/participation                      NO  
If YES please state amount

**DETAILS OF STAFFING:**

15. Does your organisation have any staff?                      YES

If YES                      (a) are they paid or voluntary? 3 paid Staff and 26 volunteers  
                                    (b) what do they do? Full-time Project Manager, part-time administrator and part-time male support worker

**DETAILS OF PROJECT:**

16. What is the project for which the grant is being sought? (Please give clear details of why the money is needed and how it will be used)

Continuation of counselling and support for male and female victims of abuse. We have seen 3 clients in the last year from your parish which equates to 2% of our total client base. It costs approximately £10,000 to just provide the counselling part of our service. Many victims may then join other support groups we run such as the Freedom Programme, Moving On and workshops.

17. What is the total cost of your project? (please attach costings if possible)  
£10,000
18. How much grant are you seeking?  
£100
19. If the total cost exceeds the grant applied for how will the balance be sourced?  
Other parish councils, local churches, charitable trusts and personal giving.

**OTHER SOURCES OF SUPPORT:**

20. What fund-raising events have you undertaken in the last two years?  
**We have run family fun days, sponsored events, raffles and collections**
21. Have you approached any other bodies for funding this project?                      YES  
If YES please give details including the level of support given  
We have contacted all parish councils and at present we have received 2 donations, but interest from many others who we are awaiting a response.
22. Has your organisation previously received a grant from Drayton Parish Council NO  
If YES please give details of the date, amount and purpose of all grants received within the last 5 years

**DECLARATION**

**I apply for grant aid on behalf of the organisation, and that I declare that I undertake on behalf of the organisation that any grant made by the Council, or such part of it as the Council may determine, will be repaid if the facilities cease to be used for the purpose for which the grant was given or it is found that the information given above is not correct.**

**Signed: N.Brown**

**Name (in block capitals): NADIA BROWN**

**Date: 11/9/2017**

PLEASE ATTACH ANY OTHER DETAILS YOU THINK ARE RELEVANT TO THIS APPLICATION

29<sup>th</sup> June 2015

Please complete and return to:  
Mr David Perrow, Clerk to the Parish Council  
12 Loddon Close  
Abingdon, Oxon, OX14 3TB

29<sup>th</sup> June 2015