# Cost of living grant overview

## Criteria for application

This grant exists to:

* Help girls experiencing financial insecurity with the costs of guiding.
* Create more guiding opportunities in deprived areas
* Help struggling units to stay open.

It can be used for anything which will help with any of the above, including but not limited to covering 2024 subscription fees, contributing to the cost of hall rent or subsidising the cost of uniform.

## How to apply

Complete the application form and return it to tracey@girlguidingulster.org.uk . Please complete it as fully as possible, as missing any section or including incorrect information will delay the processing.

* Please ensure the CCNI return is up to date for your unit and state the Charity Number.
* Please attach most recent bank statement with your application form.

**Closing date for applications is Friday 12th January 2024.**

## What happens next

We will acknowledge receipt of your application. If it is successful we will contact you to ask for the account details for payment. Payments will only be made into a Girlguiding account. We aim to complete this process within one month. Grant applications will be recorded on GO.

## After payment has been made

We will contact you after you have received the payment to ask you how many girls/units have been supported by the grant, and for a short statement about how the grant has helped meet the aims in 1.1.

# Cost of living grant application

## Your details

|  |  |  |  |
| --- | --- | --- | --- |
| Your name  |  | Your membership number |  |
| Your email address  |  |
| Unit/level name  |  | Unit/level number |  |
| How much are you applying for? The maximum is £200 per unit £ |
| Number of girls in unit  | * CCNI Charity number >
 |
| Is your unit registered with the Education Authority? Y/N |
| Is your unit in receipt of E.A. funding? Y/N |

## Using the grant

Which of the following will the grant help you with? (select all that apply)

|  |  |
| --- | --- |
| * Help girls experiencing financial insecurity with the costs of guiding.
 |  |
| * Create more guiding opportunities in deprived areas
 | *
 |
| * Help struggling units to stay open.
 |  |
| Use the space below to describe how you will use the grant. |
| When do you expect to use the grant? (we will contact you after this date to ask some questions) |  |

## Declaration

I, (print name) confirm that, if the grant is accepted, the money will be used for the stated purpose or returned to Girlguiding.

Signed > Date >

## Approval of local commissioner

|  |  |
| --- | --- |
| Commissioner name  |  |
| Commissioner membership number |  |
| Commissioner level (e.g. district name, division name, county name) |  |

I, (print name) have checked this application, support it and can confirm that the application details are accurate.

Signed > Date >

## What will you do with my data?

It’s simple. We need the information you share with us to run our exciting activities and to satisfy our legal responsibilities. We’ll keep your data safe.

We promise we’ll only share your information if:

* you ask us to
* the law requires us
* in order to comply with our policies
* we carry out market research
* it’s in the public interest

Don’t worry – we’ll never sell your data or share it for any other reason.

Girlguiding Ulster is the registered data controller\* for all our members’ personal information, both in the UK and around the world.

Want to find out more about how we use your information – and your rights?

Visit girlguidingulster.org.uk [Privacy Policy](https://girlguidingulster.org.uk/privacy-policy)