



Covid-19 Community Response Fund

We want this form to be simple to complete. Short answers to the questions are good. If you are unsure about any part of the form then please email us for help – welovemcrcharity@manchester.gov.uk

Thank you for the work you do for our city.

1.1 Details of you and your organisation / group		
Name of organisation / group		
Address of organisation including postcode		
Organisation's website and / or social media addresses (if applicable)		Website: Twitter: Facebook: Instagram:
Main contact person	Name	
	Role	
	Contact address (if different to organisation address)	
	Telephone number	
	Email address	
Second contact person	Name	
	Role	
	Contact address (if different to organisation address)	
	Telephone number	
	Email address	
Is your organisation incorporated?		Yes ☐ No ☐
What is the status of your organisation e.g. charity, CIC, community group?		
Please supply any relevant registrations or		Name Reference/Number



reference numbers (e.g Registered charity number)		
Date your organisation was established?		
Do you have a governing document (A constitution?)	Yes ☐ No ☐	

1.2 Tell us about your organisation's specific response to the Covid-19 crisis to enable ongoing support to your clients / service users.

Tell us how what you normally do has had to adapt, change or stop.

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1.3 Tell us about your Group's / organisation's proposals to support your clients / service users in a different or new way going forward. What extra support do you need to do this? What impacts will this have?

Please advise how you will work within current government guidelines

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1.4 Activities Coverage

Which areas do your beneficiaries (people you want to help) mainly come from?
(If your activities are city-wide put a "Y" by all the boxes)

North Manchester

☐

Central Manchester

☐

South Manchester

☐

Please specify which Wards in particular your beneficiaries come from if known (we can help you with this if you are not sure)

2.0 Costs and Finance

Tell us here what you plan to spend your grant on.

You are able to apply for £500 - £3000. If you have quotes for any planned expenditure (room or van hire for example) then please attach to your application. If you do not have quotes, don't worry.

Please use an additional sheet if needed.

Expenditure Item	Cost



Total	

2.1 Have you received any other emergency funding in relation to Covid-19?

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2.2 Please give details of the organisation's bank account into which a grant would be paid. We cannot make payments to personal bank accounts.

As proof that the above bank account is genuine, please send a copy of your most recent bank statement with your application.

Name of organisation's bank account	
Name of bank/building society	
Address of bank/building society	
Bank account sort code	
Bank account number or building society number	

2.3 Any other information you would like us to know.

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3.0 Declarations

3.1 Declare any interests of your organisation's employees or board / management committee members that may be relevant to your application.

3.2 Declaration

I declare that the information given on this application form is accurate to the best of my knowledge and that I am authorised to submit this application.

I understand that I must notify We Love MCR Charity of any significant changes to the application and that misleading information can invalidate this application.

Signatory (The main contact named above)

You may contact me during assessment, and I confirm I am authorised by the organisation for this purpose and that you may rely on further information supplied by me.

Name

Position

Date

Please return this form and any supporting information to us by email –
welovemcrcharity@manchester.gov.uk