

Communities Mental Health and Wellbeing Fund

Voluntary Action Orkney (VAO) is delighted to act as the funding lead partner for Orkney, working collaboratively with the Orkney Partnership's Community Wellbeing Delivery Group, and the Integration Joint Board (IJB) to effectively distribute the Scottish Government's Communities Mental Health and Wellbeing Fund to small, grass roots, community groups and organisations.

The purpose of the Fund is to support community-based initiatives that promote and develop good mental health and wellbeing and mitigate and protect against the impact of distress and mental ill health within the adult population.

Small grant applications (up to £2,500) can be submitted at any time up until **9am on Monday 14 February 2022**.

The deadline for **large grant applications** (up to £10,000) is **9am on Monday 17 January 2022**.

Please read the Fund guidance notes for further information about the Fund, eligibility, what can and cannot be funded and the support available to applicants.

Application Forms should be completed and emailed to Clare Gee at clare.gee@vaorkney.org.uk or posted to Voluntary Action Orkney, 6 Bridge Street, Kirkwall, KW15 1HR marked CMHWF.



Communities Mental Health and Wellbeing Fund

Project/Activity Title	
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Organisation	
Contact name	
Position in organisation	
Contact address	
Contact telephone number	
Contact email	

Is this a partnership application?	Y/N
If yes, which other organisation/s are taking part?	
If yes, are you the lead partner?	Y/N
What type of group / organisation are you	
Are you a voluntary or community organisation (including a registered charity or company, or a social enterprise)?	Y / N
Do you have a constitution or a set of rules?	Y / N

If you are a charity and, or company please give your charity or company number/s below	
Charity:	
Company:	
Does your constitution / set of rules allow you to carry out the activities you are applying for funding for?	Y / N

<p>Your project</p> <p>Please tell us what you want to do</p>	
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When will your project start?	
When will your project end?	

<p>Please briefly explain how you know that your proposed project/activity will meet local needs</p>	
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<p>Which local priorities will your project/activity aim to achieve?</p> <p>Please refer to the guidance for details</p>	<ol style="list-style-type: none"> 1. Social Isolation 2. Prevention of Suicide 3. Unpaid Carers 4. Older People 5. Rurally/Island Distanced 6. Poverty 7. Trauma 	<p>Y/N</p> <p>Y/N</p> <p>Y/N</p> <p>Y/N</p> <p>Y/N</p> <p>Y/N</p> <p>Y/N</p>
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<p>Is the proposed activity Orkney-wide?</p> <p>Is the proposed activity for a specific geographic area? If for a specific geographic area, please state which area:</p>	<p>Y / N</p> <p>Y / N</p>
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<p>How will you know your project/activity outcomes have been successful?</p>	
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<p>Does your group have a bank account?</p> <p>If yes, please fill out the bank details below</p> <p>If no, please give the details of a host bank account below</p>	<p>Y / N</p>
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<p>Bank Details</p>	
<p>Name of Bank/Building Society and Branch Name</p>	
<p>Cheque to be made payable to</p>	
<p>Account Number</p>	
<p>Sort Code</p>	

How much will your project cost?	£
How much do you want from us?	£

Please provide a breakdown of the cost of your project / activity		£
		£
		£
		£
		£
Total		£
Match/in kind funding (not essential)		£
		£
		£
Total Amount Requested		£

Additional information required:	
Have you attached your constitution or set of rules?	Y / N
Have you attached your most recent set of accounts?	Y / N
Have you attached a letter of support from your host bank account holder (if required)	Y / N or N/A
If your application is on behalf of a partnership, have you included confirmation that the other organisation/s are happy to take part?	Y / N or N/A

Declaration

I apply, on behalf of the organisation named above, for funding as outlined in this proposal to be spent over the proposed funding period on the activities described above. I certify that, to the best of my knowledge and belief, the statements made by me in this application are true and the information provided is correct.

Name	Position	Date

Signed.....