201**2-13** 

## **ASSISTANCE TO THIRD SECTOR ORGANISATIONS**

# Assessment form Third Sector Grants including Events and Festivals

#### 1 <u>Details</u>

| Name of Assessing Officer  |   | Liz Marion             |                            |                    |                        |
|--|---|------------------------|----------------------------|--------------------|------------------------|
| Name of Organisation   |   |                        | Cowal Music Club           |                    |                        |
| Contact Person in Organisation   |   |                        | Dorothy McLennan           |                    |                        |
| Have you contacted/visited the or application?   |   |                        | rganisation to assess this |                    | Contacted √<br>Visited |
| Name and Designation of Council Officer you have contacted to discuss the application eg Arts & Culture, Social Work, Sports etc.  |   |                        |                            |                    |                        |
| Name   | Name: Designation:  |                        |                            |                    |                        |
| Third Sector   |   |                        |                            | Events and Festiva | als                    |
|  |   | ested from A & B C     | ouncil?                    | £600               |                        |
|  |   | rded last year?        |                            | £0                 |                        |
|  |   | ect cost?              |                            | £4,610             |                        |
|  |   | coming from own        |                            | £2010              |                        |
|  |   | coming from other      | agencies?                  | £2000              |                        |
|  |   | ommendation            |                            | £450               |                        |
| <b>Reason for grant:</b> (Please be specific as this will inform the subsequent contract)  A contribution towards the staging of six concerts of chamber music from October to March   |   |                        |                            |                    |                        |
| Please   | e tick w  | hich of the following  | g is being addre           | essed:             |                        |
| a)   |   | sing Social Inclusion  |                            |                    |                        |
| b)   | Alleviation of rural isolation                                |                        |                            |                    |                        |
| c)   | Community Capacity Building √                                 |                        |                            |                    |                        |
| d)   | Enhancement of quality of life for residents and visitors   √ |                        |                            |                    |                        |
| e)   | Positive impact on local communities   √                      |                        |                            |                    |                        |
| f)   | Improvement of health and wellbeing                           |                        |                            |                    |                        |
| g)   | Positive  | impact on the local er | nvironment                 |                    |                        |
| Have you received an end of project report for the previous grant award? N/A   |   |                        |                            |                    |                        |
| If No, please give a reason  |   |                        |                            |                    |                        |
|  |   |                        |                            |                    |                        |
| Do you consumulate the appropriation in their consequent of good O. Discos and J. Disc |   |                        |                            |                    |                        |
| Do you concur with the organisation in their assessment of need? Please supply a very brief summary  |   |                        |                            |                    |                        |
| The group does not have enough reserves to be able to meet all the costs of the events. They   |   |                        |                            |                    |                        |
| wish to provide events in a wide range of chamber music for a number of residents of the area.   |   |                        |                            |                    |                        |
| If the organisation has received funding over the previous 2 years please justify reason for re-awarding a grant?  |   |                        |                            |                    |                        |

## 2 Financial Check – Have you checked the Organisation is:

| a)                   | Has passed financial check   | N/A                  |
|----------------------|--|----------------------|
| b)                   | Fully constituted  | Yes                  |
| c)                   | Has submitted a bank statement for all bank/savings  | Yes                  |
|                      | accounts   |                      |
| d)                   | Has submitted audited/signed accounts (or signed financial   | Yes                  |
|                      | projections if a new group).   |                      |
| e)                   | Within 50% of the costs for the project/activity   | Yes                  |
|                      |  |                      |
|                      |  |                      |
| Add                  | ditionally, for Events and Festivals, have you checked the C   | Organisation has:    |
| <b>Add</b>           | ditionally, for Events and Festivals, have you checked the C<br>A viable business plan   | Organisation has:    |
|                      |  |                      |
| g)                   | A viable business plan   | No                   |
| g)                   | A viable business plan A marketing plan for the activity   | No<br>No             |
| g)<br>h)<br>i)       | A viable business plan A marketing plan for the activity A previous event budget   | No<br>No<br>No       |
| g)<br>h)<br>i)       | A viable business plan A marketing plan for the activity A previous event budget A planning framework with clear ownership, responsibility                             | No<br>No<br>No       |
| g)<br>h)<br>i)<br>j) | A viable business plan A marketing plan for the activity A previous event budget A planning framework with clear ownership, responsibility and liability for the event | No<br>No<br>No<br>No |

## 3 **General Criteria**

| a) | Is the activity non-political?                               | Yes  |
|----|--|------|
| b) | Is the project consistent with Council priorities?           | Yes  |
| c) | Does the project have open membership?                       | Yes  |
| d) | Have sponsorship agreements been checked?                    | N/A  |
|    |  |      |
| e) | How many people overall will benefit from this grant?        | 100+ |
| f) | Is the organisation well established?                        | Yes  |
| g) | Have you identified any training needs for the organisations | No   |
|    | committee or volunteers?                                     |      |
| h) | Does the organisation have volunteer training in place?      | No   |
| i) | Have you confidence in their ability to deliver a service?   | Yes  |

#### 4 Policy and Procedures

|            | Have you checked that the organisation, particularly if they work with children under 18 or vulnerable adults have a |     |  |
|------------|--|-----|--|
| a)         | Child Protection Policy or are compliant with the VPG. If No, can you refer to Children and Families Section, SW?    | Yes |  |
| b)         | Clear recruitment policies   | Yes |  |
| c)         | Ongoing training and support for volunteers  | No  |  |
| d)         | A code of conduct for staff and volunteers   | Yes |  |
| e)         | A Code of Good Practice  | No  |  |
| f)         | An Equal Opportunities Policy  | No  |  |
| g)         | A Policy for Managing Confidential Information   | No  |  |
| h)         | Grievance Procedure for staff and volunteers   | No  |  |
| i)         | A Disciplinary Procedure for staff and volunteers  | No  |  |
| Comments : |  |     |  |
|            |  |     |  |

#### 5 **Equal Opportunities**

| What are the clients ethnic group(s)? |                      |  |  |  |
|---------------------------------------|----------------------|--|--|--|
| A                                     | White √              | Scottish                                   |  |  |
|                                       |                      | Any other White background please specify  |  |  |
| В                                     | Mixed √              | Any Mixed background please specify        |  |  |
| С                                     |                      | Eastern<br>European                        |  |  |
| D                                     | Asian, Asian Scotti  | sh or Asian British<br>Indian Pakistani    |  |  |
|                                       |                      | Bangladeshi Chinese                        |  |  |
|                                       |                      | Any other Asian background please write in |  |  |
| E                                     | Black, Black Scottis | sh or Black British<br>Caribbean African   |  |  |
|                                       |                      | Any other Black background please write in |  |  |
| F                                     | Other Ethnic backg   | round Any other background please write in |  |  |

Signed: E A Marion

**Designation: Community Development Officer** 

Date: 11 July 2012