

ASSISTANCE TO THIRD SECTOR ORGANISATIONS**Assessment form Third Sector Grants including Events and Festivals**1 **Details**

Name of Assessing Officer	Morevain Martin	
Name of Organisation	Dumbarton & District MS Society	
Contact Person in Organisation	Mr D Mustarde	
Have you contacted/visited the organisation to assess this application?	Contacted	
Name and Designation of Council Officer you have contacted to discuss the application eg Arts & Culture, Social Work, Sports etc.		
Name:	Designation:	
Third Sector <input checked="" type="checkbox"/>	Events and Festivals <input type="checkbox"/>	
a) Grant requested from A & B Council?	£1,834	
b) Grant awarded last year?	£1,400	
c) Total Project cost?	£3,668	
d) How much coming from own resources?	£1,834	
e) How much coming from other agencies?	£0	
f) Grant Recommendation	£1,050	
Reason for grant:	<i>(Please be specific as this will inform the subsequent contract)</i> The funding is required to provide a fitness instructor competent in supporting both MS sufferers and their carers. The service includes transport to and from the activity, if required, so that no MS sufferer is excluded	
Please tick which of the following is being addressed:		
a)	Addressing 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 environment	
Have you received an end of project report for the previous grant award? Yes No		
If No, please give a reason		
Awaiting ?		
Do you concur with the organisation in their assessment of need? Please supply a very brief summary		
This service has proved to have a positive impact on both MS sufferers and their carers.		

If the organisation has received funding over the previous 2 years please justify reason for re-awarding a grant?

The organisation is constantly evaluating its service and looking for alternative sources of funding.

2 Financial Check – Have you checked the Organisation is:

a)	Has passed financial check	To be confirmed
b)	Fully constituted	Yes
c)	Has submitted a bank statement for all bank/savings accounts	Yes
d)	Has submitted audited/signed accounts (or signed financial projections if a new group).	No independent audited accounts
e)	Within 50% of the costs for the project/activity	Yes

Additionally, for Events and Festivals, have you checked the Organisation has:

g)	A viable business plan	Yes	No
h)	A marketing plan for the activity	Yes	No
i)	A previous event budget	Yes	No
j)	A planning framework with clear ownership, responsibility and liability for the event	Yes	No
k)	Evidence of appropriate insurance coverage	Yes	No
l)	Compliance with all relevant legal and licensing requirements	Yes	No
m)	Letters of support from other funders or local organisations	Yes	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?	to MS sufferers and carers
d)	Have sponsorship agreements been checked?	n/a
e)	How many people overall will benefit from this grant?	23
f)	Is the organisation well established?	Yes
g)	Have you identified any training needs for the organisations committee or volunteers?	No
h)	Does the organisation have volunteer training in place?	Yes
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 Child Protection Policy or are compliant with the VPG. If No, can you refer to Children and Families Section, SW?	No policies received	
a)		Yes	No
b)	Clear recruitment policies	Yes	No
c)	Ongoing training and support for volunteers	Yes	No
d)	A code of conduct for staff and volunteers	Yes	No
e)	A Code of Good Practice	Yes	No
f)	An Equal Opportunities Policy	Yes	No
g)	A Policy for Managing Confidential Information	Yes	No

h)	Grievance Procedure for staff and volunteers	Yes	No
i)	A Disciplinary Procedure for staff and volunteers	Yes	No
Comments :			

5 Equal Opportunities

What are the clients ethnic group(s)?

A White
 Scottish Other British Irish
 Any other White background please specify

B Mixed
 Any Mixed background please specify

C Eastern European

D Asian, Asian Scottish or Asian British
 Indian Pakistani
 Bangladeshi Chinese
 Any other Asian background please write in

E Black, Black Scottish or Black British
 Caribbean African
 Any other Black background please write in

F Other Ethnic background
 Any other background please write in

Signed:

Designation:

Date: