 COMMUNITY GRANTS SCHEME

**Coaches / Officials Application Form**

Grants are available to encourage, support and promote the training and development of sports coaches and officials.

To be eligible for a Coaches / Officials grant, applicants:

* Must live in Fife;
* Must be volunteering within a sports club with a **sport**scotland recognised Governing Body;
* Must provide confirmation from their Sports Club that they are attending the course for the benefit of the Club, i.e. supporting letter or email naming them as a selected candidate;
* Must submit applications **prior** to the course commencing, as no awards will be made in retrospect;

Grants will be released only when proof of attendance and successful completion of the course is provided.

Applicants can receive grants up to 50% of the total course costs, to a maximum of £200

Email details to community.grants@fife.gov.uk or post to the following address:

Community Grants

Community Investment Team

Fife Council Communities & Neighbourhoods

Fife House (F3 Main)

North Street

GLENROTHES

KY7 5LT

**SECTION 1 – COACH / OFFICIAL DETAILS** *(please provide adult contact details if applicant under 18 years of age)*

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Coach/Official: |  | Name of Contact: |  |
| Address: |  |
|  |
| Postcode: |  | Daytime Tel No: |  |
| Email Address: |  |
| Date of Coach/Official Birth: |  |
| Name of Club/Group of which you are a volunteer Coach/Official: |  |
|  |

|  |  |  |
| --- | --- | --- |
| *For Official Use Only:* |  |  |
| *Date Received:* | *Serial No.:* | *Ward:* |
| *Date of Decision:*  | *Amount Awarded:*  | *Name of Officer:* |
| *ERP Serial No.:* | *Approval Date:* | *Name of Manager:* |

**SECTION 2 – COURSE DETAILS**

|  |  |
| --- | --- |
| Is your club affiliated to the National Governing Body of Sport? | YES / NO |
| Are you actively coaching / officiating at present? | YES / NO |
| If yes, please stated where and when: |
| Level of Coaching / Officials awards already held: |
| **Details of Coaching / Officials Course** |
| Name of Course: |  |
| Dates(s): |  |
| Venue: |  |
| Cost: |  |

**SECTION 3 -** **FINANCIAL DETAILS**

|  |  |  |
| --- | --- | --- |
| Amount of financial assistance requested from Fife Council: | £ |  |

|  |  |
| --- | --- |
| Name of your Bank/Building Society: |  |
| Name of Bank Account Holder: |  |
|  |  |
| Sort Code |  |  |  |  |  |  | Account No. |  |  |  |  |  |  |  |  |  |
|  |  |

|  |
| --- |
| Please give details of any fundraising carried out and amounts raised (raffles, coffee-mornings, etc): |
|  |
|  |
|  |
|  |

Are you / a member of your immediate family an elected member or officer of Fife Council? Yes / No

|  |  |  |
| --- | --- | --- |
| Name | Fife Council Service | Relationship to you |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**SECTION 4 – FINISHING YOUR APPLICATION**

Before submitting your application, please ensure that:

* You have completed all relevant sections of this application form;
* You include confirmation from your Sports Club that you are attending the course for the club’s benefit;
* You have read and understand the contents of this form, including data protection and by signing below you agree to all terms and conditions.

**DATA PROTECTION**

All collection, use and storage of personal information will be in accordance with the Data Protection Act 1998. Further information is available on the website www.fifedirect.org.uk

**TERMS AND CONDITIONS**

1. The grant must only be used for the purpose for which it was approved by Fife Council.
2. Individuals can apply to only one Fife Council grant scheme to fund this project.
3. The individual will provide such financial or other information as Fife Council may request.
4. Grants will not be awarded retrospectively, i.e. we do not refund costs that were incurred prior to the date the application was received in this office.
5. All grants are discretionary and only one application will be considered from an individual in any financial year (1 April to 31 March).
6. The information provided by you on this form will be used by Fife Council in order to process your application. It may be shared with FVA, NHS Fife and other local authority services or external funders and information will be obtained from your application.

 **SIGNATORY** - *(if applicant is under 18, the form must be signed by an adult)*

I certify that all the information given in this form is, to the best of my knowledge, correct. I have read, and agreed to comply with, the above conditions.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |
| Relationship (if applicable): |  |

**Please note: Applicants will be allowed 2 consecutive awards, then a rest year will be expected before they can reapply for funding assistance.**