**Food Response Fund**

**February 2024/25**

Salford CVS is offering investments of **£3,000** to support VCSE organisations undertaking vital work providing food to those with **No Recourse to Public Funds (NRPF), refugees, or asylum seekers.** This can be spent on food and supplies for beneficiaries of your food club/bank/pantry/organisation.

**This award cannot be used to make cash payments/grants to beneficiaries.**

This has been made possible by funding from **NHS Salford Integrated Care Partnership.**

**a) Lead Contact**

|  |  |
| --- | --- |
| Name: |  |
| Role: |  |
| Tel Number: |  |
| Mobile Number: |  |
| Email address: |  |
| Address line 1 |  |
| Address line 2 |  |
| Town / City |  | Postcode: |  |

**b) Secondary Contact**

|  |  |
| --- | --- |
| Name: |  |
| Role: |  |
| Tel Number: |  |
| Mobile Number: |  |
| Email address: |  |
| Address line 1 |  |
| Address line 2 |  |
| Town / City |  | Postcode: |  |

*Organisations: one contact must be a senior member of staff.*

*Unincorporated associations: both contacts must be a member of your management committee.*

**Part 1 - About your organisation**

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| **1)** Organisation name: |  |
| **2)** Address line 1 |  |
| **2)** Address line 2 |  |
| **2)** Town or City |  | Postcode: |  |
| **3)** What is your organisation’s annual turnover?  | £ |
| **4)** How is your organisation constituted? *(see guidance notes for details)* |
|  |
| **5)** Organisation number *(if applicable)****:*** |  |
| **6)** Website and social media URLs: Facebook, Twitter, Instagram, LinkedIn… |
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| **Paying the Living Wage** | **Yes** | **No** | **N/A** |
| **7) If you employ staff,** do you pay all your staff at the Living Wage Foundation’s minimum rate of **£12.60/hour**? |  |  |  |
| **8) If you employ staff,** is your organisation accredited with the LW Foundation as a Living Wage Employer? |  |  |  |
| **9) If you answered No, to qu. 10,** are you interested in Salford CVS paying your first year’s LWF accreditation fees? |  |  |  |

**Your organisation’s policies, procedures and insurance**

|  |  |
| --- | --- |
| **10) Please tell us which policies you have in place:** | *Please tick 🗸* |
| a) Health and Safety policy |  |
| b) Equality/Diversity Statement or Policy |  |
| c) Volunteer Policy *(if applicable to project activities)* |  |
| d) Public Liability Insurance |  |
| e) Risk assessments |  |
| f) Safeguarding Adults policy *(if applicable to project activities)* |  |
| g) Safeguarding Children policy *(if applicable to project activities)* |  |

**Part 2 – About your provision**

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| --- | --- |
| **11) What type of food response do you provide?** | *Please tick 🗸* |
| a) Food bank (referral only) |  |
| b) Food club (open to the community) |  |
| c) Hot meals/warm space  |  |
| c) Community group that provides food/supplies alongside activity |  |
| d) Other (please state below) |  |
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| **12)** What do you provide for those with NRPF, asylum seekers, refugees and how often? e*.g. warm space and hot meal once a week, weekly food pantry etc.*  |
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| --- | --- |
| **13)** How many people **with no recourse to public funds, refugees or asylum seekers** do you support with food/ supplies per week? |  |

|  |
| --- |
| **14)** How do you record this data? *E.g. register, head count, referrals.* |
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| **15)** Please describe the needs of your community. What difference would a donation of £3,000 make to what you can provide? |
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| **16) Which areas of Salford do you work in?** (*Please tick all that apply)* ✓ |
| Barton & Winton |  |  | Pendlebury & Clifton |  |
| Blackfriars & Trinity |  |  | Pendleton & Charlestown |  |
| Boothstown & Ellenbrook |  |  | Quays |  |
| Broughton |  |  | Swinton & Wardley |  |
| Cadishead & Lower Irlam |  |  | Swinton Park |  |
| Claremont |  |  | Walkden North |  |
| Eccles |  |  | Walkden South |  |
| Higher Irlam & Peel Green |  |  | Weaste & Seedley |  |
| Kersal & Broughton Park |  |  | Worsley & Westwood Park |  |
| Little Hulton |  |  |  |  |
| Ordsall |  |  | **OR CITY-WIDE** |  |

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| --- |
| **17)** Please provide a **full postcode** below that best identifies the location of your venue/work. If this isn’t possible, please give details below.*We’d like to highlight all our funded projects on a web-based map.* |
|  |

**Declaration**

Please confirm that you have read the [**Terms and Conditions**](file:///C%3A/Users/niamhmeehan/Downloads/SCVS_TandCs_Grants_and_Investments_08_2023.pdf) of this grant by giving the name and role of the lead applicant.

|  |  |
| --- | --- |
| Name (signature **not** required): |  |
| Role in the organisation: |  |
| Date: |  |

Please submit this application form to: **grants@salfordcvs.co.uk**

**by 12:00 (midday), Monday 17th March**