

# Community Growth Scale Up Programme

## **Application Form**

The Community Growth Scale Up Programme will run in partnership with the School for Social Entrepreneurs (SSE) and funded by City Bridge Trust

We know you may not have everything in place yet. Please try to answer all the questions as fully as possible. If you don't know something, please say this or write "N/A" rather than leaving blank.

Feel free to contact us to ask questions at sarah.hertzog@sse.org.uk

This form should be completed in the name of the lead applicant, who will be the person who will attend the interview and the programme.

#### The closing deadline for applications is on 23rd June 2023

#### Support with completing your application form:

- **Guidance:** Please carefully read the Application Guidance.
- Questions: See the questions and draft your responses. This downloadable set of application questions, with guidance provides space for you to plan your answers and share these with others in your organisation. You will then need to copy your answers to this online form.
- **Webinars:** To find out more about the programme, help you understand the criteria and how to apply, you will be able to book onto webinars. We will share information of those events via our website page. If you book and can't attend, we can send you a recording.
- **Helpdesk:** Ask questions and get advice on completing your application at **sarah.hertzog@sse.org.uk** or **01872306130**
- One-to-one support: If you have difficulty filling in forms because of dyslexia, language or disability, or need one-to-one advice about applying, we have a limited number of one-to-one sessions available. Please contact the helpdesk if you need to access these.

#### **Data protection**

The School for Social Entrepreneurs ("SSE") is committed to protecting your personal information and acting in line with your rights under data protections laws and will treat all data in accordance with our Data Protection Policy.

To process your application, SSE will collect and use personal information provided by you in this form or separately, or which we otherwise lawfully obtain about you. We may use this information to;

- process your application and manage the selection process for this programme
- conduct due diligence on you and your organisation
- contact you about your application for this programme by phone or email

If your application is successful, we may also use your information for:

- managing your participation in the Programme
- sharing and promoting your story and the story of your community business
- other lawful reasons

We may share your information with our funders and partners. They will also only use your information for the reasons above.

Further details, including how we share your information and your rights relating to our use of your information, can be found under our Data Protection Notice, a copy of which is available here: <a href="https://www.the-sse.org/your-data">https://www.the-sse.org/your-data</a>

In proceeding with your application you agree to us processing your application in accordance with our data protection policy.



# Community Growth Scale Up Programme

### **Application Form**

Throughout this form a \* indicates a required field.

You can save your application to return to later. Please save the URL link provided when you click save for later.

Important: The form has an auto-refresh after 24 minutes and any unsaved data will be lost.

Please press 'save for later' at the bottom of each page regularly to ensure your form saves.

Once you have filled in your email address below and pressed 'save for later' you will receive a URL to save.

### A: Your details

A1. Name
A2. What is your preferred name, if different from the above?
A3. What are your preferred pronouns?
A4. What is the name of your organisation?
A5. What is your role in your organisation?
A6. Email address A7. Your mobile phone number (or other phone number if no mobile)
A8. Your year of birth - We need this for ID check purposes only. A9. We want our programme to be as accessible as possible.
If you feel you would require reasonable adjustments prior or in order to participate in an SSE programme due to a disability, caring responsibilities or any other reason, please give details below or contact us by phone or email to discuss further.
A10. Please confirm you will be the lead participant and will commit to attending at least 80% of the learning programme  Yes
O No
A11. Please confirm that you are at least the age of 16 and resident and eligible to work in the UK  Yes
O No
A12. Have you or anyone else in your organisation previously applied to SSE?  Yes
O No
A13. Do you work for or are you connected (financially or by family) to anyone who is employed by or is a board member of SSE or City Bridge Trust?  Yes
No A14. How did you hear about this programme?
At 1. How and you near about this programme.





## **Community Growth Scale Up Programme**

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#### **B:** Your organisation

Facebook (if applicable)

B1. Have you already established an organisation, e.g adopted a constitution or registered a company or charity? Answering 'no' to this question will prevent some questions from appearing. Do not be alarmed, this is by design. Please fill out the questions presented by the form. Yes Is your project hosted by or part of a larger organisation? Yes No B8. Please confirm that most of your beneficiaries are based in Greater London. Yes O No B9. Please provide your organisation or project's details, web and social media accounts Phone number Email address Website (if applicable) Twitter (if applicable) Instagram (if applicable)

B10. Does your organisation work with children, young people or adults in a vulnerable
situation? If yes, please attach a copy of your Safeguarding Policy, if you have one.
O Yes
O No
B11. Does your organisation have an Equalities and Diversity Policy or equivalent?
O Yes
O No



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## **Application Form**

## C: More about your organisation

<b>C</b> 1	Where you works Disease tall we which I and an however a your homefinioning live in
U1.	Where you work: Please tell us which London boroughs your beneficiaries live in. City of London
	Barking and Dagenham
	Barnet
	Bexley
	Brent
	Bromley
	Camden
	Croydon
	Ealing
	Enfield
	Greenwich
	Hackney
	Hammersmith and Fulham
	Haringey
	Harrow
	Havering
	Hillingdon
	Hounslow
	Islington
	Kensington and Chelsea

	Kingston upon Thames
	Lambeth
	Lewisham
	Merton
	Newham
	Redbridge
	Richmond upon Thames
	Southwark
	Sutton
	Tower Hamlets
	Waltham Forest
	Wandsworth
	Westminster
C2	. What borough of London is your organisation based in? If outside of London, please
spe	ecify.
	City of London
	Barking and Dagenham
	Barnet
	Bexley
	Brent
	Bromley
	Camden
	Croydon
	Ealing
	Enfield
	Greenwich
	Hackney
	Hammersmith and Fulham
	Haringey
	Harrow
	Havering
	Hillingdon
	Hounslow
	Islington
	Kensington and Chelsea
	Kingston upon Thames
	Lambeth
	Lewisham
	Merton
	Newham
	Redbridge
	Richmond upon Thames
	Southwark
	Sutton

☐ Tower Hamlets
□ Waltham Forest
□ Wandsworth     □
<ul> <li>Outside of London</li> </ul>
If you selected outside of London, please select the area your organisation is located
in.  ▼
Please select
C3. What is the main impact area of your organisation or project?
▼
Please select
If other then please specify
C4. Who are your main beneficiaries?

Please select

C5. Staff: Approximately how many people are paid to work for your organisation (if any)?

(We just need a number, you don't have to work out full time equivalent numbers)

- C6. Volunteers: Approximately how many volunteers are involved in your organisation? (A broad idea is fine. Include board members who actively volunteer)
- C7. Beneficiaries: Approximately how many people have benefitted from your activities in the last year?

(A broad idea is fine, you don't need to count them!)



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### **D: Your Finances**

- D1. Income in the last financial year: What was your organisation's income in your last financial year?
- D2. Expenditure in the last year: What was your organisation's expenditure in your last financial year?

D3. Tell us a bit more about your last financial year. Please tell us about: Your income: Tell us a bit about where this has come from - eg grants, sales, contracts etc. Anything else that would help us to understand your finances.

You can upload a separate document if that is easier. If you are uploading the document, just write



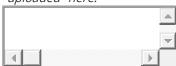
- D4. This year: What is your organisation's income likely to be this year?
- D5. This year: What is your organisation's expenditure likely to be this year?
- D6. This financial year: Please tell us about your current financial year. Please tell us about: Your income: Tell us a bit about where this has come from eg grants, sales, contracts etc: . Anything else that would help us to understand your finances.

You can upload a separate document if that is easier. If you are uploading the document, just write "uploaded" here.



D7. Your financial plans: Please tell us briefly about your financial plans for the next year. Please tell us about: What income do you think you will bring in next year. Where will this come from? How much grant income and sales income are you aiming for? Is any of this secured already?

You can upload a separate document if that is easier. If you are uploading the document, just write "uploaded" here.



- D8. Private benefit: Say yes if any of the following are true: Do you: \*Pay dividends (payments to shareholders)? \*Pay rent to people who are on your board or have a close connection to the organisation?
- \*Pay salaries above the market rent?
  \*Pay interest on loans to members of the organisation or board members?
  \*Pav companies or business that are linked to board members?
- YesNo



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#### E: Tell us more about your work and your plans

Here is where you can tell us about yourself, your organisation and why you want to take part in the programme.

You have the choice to answer the following questions either:

- a) In writing, below
- b) In a voice recording, no more than 1 minute per question\*

\*If you are sending in a voice recording, you can either upload it below or email it to sarah.hertzog@sse.org.uk (we recommend sending via WeTransfer). Title your email "Community Growth Scale Up **application**" and include your name and contact details.

Please ensure that the questions are covered in whichever format you choose. All formats are weighted equally, and the different options are simply provided to ensure that you are as comfortable and confident as possible with the application process.

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- Yes
- O No
- E1. Do you have lived experience of the issue that your organisation or project addresses?
- Yes
- O No
- Prefer not to say



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### F: Monitoring

F1. Your leadership: Tell us about the make up of your board and senior leadership as a group, if you know. You don't have to identify individuals.

Our organisation is led by people who .....

are from Black and minoritised communities?	
	<u>-</u>
Please select	
are disabled?	
	•
Please select	
are women and girls?	
	•
Please select	
identify as LGBTQIA+?	
	•
Please select	
are leaders with lived experience of the issue	s that the organisation is addressing?
·	▼
Please select	



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### G: And finally...

G1. Is there any thing else you would like to tell us?

G2. Uploads

Unincorporated organisations only - Provide a copy of your constitution (we can access this information online if you are registered with Companies House, FCA or Charity Commission)

#### Choose files or drag here

Provide a copy of your most recent statutory accounts (if available) These should be full accounts including income and expenditure/profit and loss - not abbreviated or fillets accounts

#### Choose files or drag here

Information about your current financial year (if not answered on form or previously uploaded)

#### Choose files or drag here

Information about your next financial year (if not answered on form or previously uploaded)

Choose files or drag here

A case study or your social impact report (optional)

Choose files or drag here

Your Safeguarding Policy (if required and not previously uploaded)

Choose files or drag here

If submitting a voice recording(s) for Section E, please upload them here if you have not already uploaded them

Choose files or drag here

Any additional information you want to share

Choose files or drag here

**G3.** Authorisation: I confirm that the board has authorised me to agree provide these details and to submit this application.

Yes



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If you have any problems uploading files here or wish to provide us with anything at a later date, please email **[EA E-mail address]** using the file naming guidelines outlined above.

Please state your full name and the name of the programme you are applying to in the subject line of the email e.g. 'Jane Smith [Insert Programme Name] additional documentation'

Please click 'Preview' below to review your application in read-only mode - you will need to do this in order to proceed.

If you wish to make any changes, just click 'Previous'.

Once you're ready to submit your application, click 'Apply' in the next page!

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