**Community Safety Serious Violence Fund**

**Application Form**

**Please refer to the Funding Guidance Notes before completing this application form:**

[Community Safety Serious Violence Fund - Police, Fire and Crime Commissioner North Yorkshire (northyorkshire-pfcc.gov.uk)](https://www.northyorkshire-pfcc.gov.uk/for-you/partnership/non-commissioned-community-safety-services/#Community_Safety_Serious_Violence_Fund)

**Please ensure you have completed all relevant sections, and please note that appendices or attachments will not be considered.**

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| **Applicant Details:** | | | | | | | |
| **Name of individual applicant\* / community group / organisation:** *\*please indicate organisational link. If this is a partnership application, please identify the lead agency for the project delivery and management.* | | | | | | | |
| **Overall purpose of your group / organisation (50 words max):** | | | | | | | |
| **Project Summary:** | | | | | | | |
| **Name of Project:** | | **Total Amount Requested** *(maximum £30,000)***:**  **£** | | | | | |
| **Project start date:** | | **Project end date***)***:** | | | | | |
| **Delivery / Activity type:** *Please indicate the type of activity your project will focus on (tick all that apply)*  Universal Awareness Raising / Prevention / Education-based activity to young people:  Universal Awareness Raising / Prevention / Education-based activity to adults:  Training (professionals and / or community) activity:  Targeted Diversionary activity (non-sport):  Targeted Diversionary activity (sport):  Therapeutic activity:  Targeted Early Intervention Accommodation:  Targeted Early Intervention Education, Employment and Training:  *Please indicate which……………………….*  Targeted Early Intervention Emotional Health:  Targeted Positive Relationship(s) activity:  Targeted Parenting Programme:  Targeted Community / Location\*\* activity, including Community Based Volunteers:  Targeted Desistance activity to stop (re)offending  Weapon amnesty  Other  *Please describe……………………….* | | | | | | | |
| **Is the project adopting a trauma-aware or trauma-informed approach to delivery?**  Yes  No  *Please explain your response……………………….* | | | | | | | |
| **Crime Type / Priority:** *Please indicate the crime type and local SVD priority(ies) your project will focus on (tick all that apply)*   * Homicide * Violence with Injury[[1]](#footnote-1) * Domestic Abuse * Rape and Sexual Offences * Weapon Related Violence; including Weapon Possession * Arson Endangering Life * Stalking and Harassment; non-domestic * Community Safety and Anti-Social Behaviour * Violence Against Women and Girls (VAWG) * Young People * Alcohol and Substance Misuse * Mental Health * Deprivation and Employment * Education * Other, please state and provide rationale……………………………. | | | | | | | |
| **Location:**  *Please indicate the area(s) in which your project will be delivered (please mark all that apply):*  **North Yorkshire and York Countywide**:  Craven:  Hambleton:  Harrogate:  Richmondshire:  Ryedale:  Scarborough:  Selby:  York:  *\*\*If you are delivering a Targeted Community / Location project, please identify the specific location(s):*  ……………………………………………………………………. | | | | | | | |
| **Project Details:** | | | | | | | |
| **Please identify if your project is new or existing. If new, please explain what gap the project addresses. If existing, please explain how this funding will add value and expand or develop the project further (150 words max):**  **New**  **Existing** | | | | | | | |
| **Explanation of your project and what you hope to achieve (300 words max):** | | | | | | | |
| **How will the project deliver against the North Yorkshire and York Community Safety / SVD key priorities listed above: (150 words max):** | | | | | | | |
| **Please explain the need and demand for your project and how you have evidenced this (200 words max):** | | | | | | | |
| **Please indicate the age group your project is targeted at:** *Please mark all that apply*  **0 to 11**  **12 to 15**  **16 to 18**  **19 to 24**  **25 and over** | | | | | | | |
| **Please identify and explain how the following groups will benefit from your project (100 words max per category):**  *Applications should specify the minimum number of individuals the project will work with/support* | | | | | | | |
| **Universal - not involved in offending activity. Specific locations / communities**  *Please specify if part of the Clear Hold Build approach (Scarborough / York only)* |  | | | | | | |
| **Individuals / groups at risk of offending** including serious violence  *Please specify if high risk e.g.known areas* |  | | | | | | |
| **Individuals / groups involved in offending**  *including serious violence* |  | | | | | | |
| **Individuals / groups at risk of becoming a victim**  *including serious violence* |  | | | | | | |
| **Individuals / groups at risk of repeat victimisation** *including serious violence* |  | | | | | | |
| **How will you measure the outcomes of your project and evidence success?** *Please include how you will set a baseline position* **(300 words max):** | | | | | | | |
| **Please indicate which of the following Ministry of Justice Categories of Need your project will address. Specify how positive change will be measured (100 words max per category):** | | | | | | | |
| **Mental / Emotional Health** | |  |  | | | |
| **Physical Health** | |  |  | | | |
| **Shelter & accommodation** | |  |  | | | |
| **Family, friends & children** | |  |  | | | |
| **Education, skills & employment** | |  |  | | | |
| **Drugs & alcohol** | |  |  | | | |
| **Finance & benefits** | |  | | | | | |
| **Outlook & attitudes** | |  | | | | | |
| **Social Interactions** | |  |  | | | |
| **Financial Breakdown:** | | | | | | | |
| **Please** **identify if this funding will fully or partially fund this project. If partial, please identify what other sources of funding will support the project.** | | | | | | | |
| **Description** | | **Unit Cost** | | | **Quantity** | **Total Cost** | |
|  | | £ | | |  | £ | |
|  | | £ | | |  | £ | |
|  | | £ | | |  | £ | |
|  | | £ | | |  | £ | |
|  | | £ | | |  | £ | |
|  | | £ | | |  | £ | |
| **Project Total:** | | | | | | **£** | |
| **Funding is one-off and no further funding can be guaranteed.** **Please explain how you will ensure the sustainability and legacy of your project beyond the life of this grant.** | | | | | | | |
| **Timescales for project delivery and funds spent:**  *Please indicate all Quarters in which your project will be delivered and funds spent.*  ***Funds spent must match project delivery*** *i.e. If your project will be delivered from April 2024 – April 2025, Quarterly spend must also take place in this time.*  *Please highlight all relevant Quarters with delivery and projected spend.* | | | | **Quarter 1 2024-25**  **April – June 2024**  **Projected spend: £** | | | |
| **Quarter 2 2024-25**  **July – September 2024**  **Projected spend: £** | | | |
| **Quarter 3 2024-25**  **October – December 2024**  **Projected spend: £** | | | |
| **Quarter 4 2024-25**  **January – March 2025**  **Projected spend: £** | | | |
| **Community Safety Partnership Sign-off** | | | | | | | |
| **Safer York Partnership**  **North Yorkshire Community Safety Partnership** | | | | | | | |
| **Name:** | | **Signature** *(enter full name or electronic signature):* | | | | | |
| **Job Title:** | | **Date:** | | | | | |
| **Application Main Contact Details:** | | | | | | | |
| **Main Contact:**  **Role within organisation:** | | **Main Contact email address:** | | | | | |
| **Main contact postal address:** | | **Main Contact telephone number/s:** | | | | | |
| **Main Contact Postcode:** | | **Website:** | | | | | |
| **Main Contact Signature** *(enter full name or electronic signature):* | | **Date signed:** | | | | | |

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| **Business Continuity**  We want to support you to in continuous project delivery, with work-arounds where required. Please identify your alternative arrangements and / or business continuity plans related to CoVid-19 / other circumstances and Government advice, plus any support you may require in order to achieve this. |
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**Please email your completed application form to** [**nicole.hutchinson@northyorkshire.police.uk**](mailto:nicole.hutchinson@northyorkshire.police.uk)

If your application is successful, we would like to publicise how the money is being put to good use and raise awareness of the types of excellent work being supported through this fund, in line with GDPR.

Please tick this box if you give consent to your project being included in any such PFCC and / or Home Office publicity, using non-sensitive information in line with GDPR and appropriate consent.

1. Attempted Murder, Endangering Life, Grievous Bodily Harm, Actual Bodily Harm, Administering Poison with Intent to Injure, Non-Fatal Strangulation and Suffocation [↑](#footnote-ref-1)