**Building Effectiveness**

**in the Hertfordshire Voluntary Sector**

***2020 Programme***

**Application Form**

*Please* ***type*** *your application into this document (handwritten applications not accepted)*

|  |  |
| --- | --- |
| Organisation |  |
| Contact Name |  |
| Role |  |
| Telephone |  |
| E-mail |  |
| Address |  |

|  |  |  |
| --- | --- | --- |
| **Legal status of your organisation:** | **Tick** | **Registered Number** |
| Registered Charity |  |  |
| Company with Charitable Status |  |  |
| Constituted Voluntary/Community Group |  |  |
| Other – please specify: | | |

|  |  |
| --- | --- |
| Is your organisation located in **and** delivering services in Hertfordshire? |  |
| When was your organisation established? |  |

1. **What are the aims, objectives and activities of your organisation? *(150 words max)***

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1. **How many people are involved in your organisation\*?**

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| --- | --- |
| Trustees/Committee Members/Directors |  |
| Paid managerial staff – full time |  |
| Paid managerial staff – part time |  |
| Other paid staff – full time |  |
| Other paid staff – part time |  |
| Volunteers |  |
| Beneficiaries/Service Users/Members (latest year) |  |

*\*Please attach a current organisation chart with your application*

1. **Your latest annual accounts:**

|  |  |
| --- | --- |
| Total income |  |
| Total expenditure |  |
| Current reserves |  |
| What period do the above figures relate to? |  |

1. **What are your ambitions for your organisation over the next 3 years? *(150 words)***

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1. **What are the constraints on your ability to achieve this? *(150 words max)***

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1. **What organisational development needs have you already identified? *(150 words)***

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1. **It is vital that organisations participating in this programme understand the level of commitment involved and that their board/committee and senior management have considered how they will set aside sufficient time.**
2. We have read the 2020 Programme Information and we can definitely commit to the estimated amount of time required across all phases of the project *(please tick)*

Yes No

1. We have scheduled a date during the period January – February 2020 when our CEO (or most senior manager) is available to meet the advisor to discuss the Baseline Assessment and Development Action Plan.

|  |  |
| --- | --- |
| Meeting Date |  |

1. Our CEO (or most senior manager, or Chair if no paid managers) is available for all the dates for the 2020 Leadership workshops *(please tick)*

Yes No

1. Please provide further details about who is likely to be involved in Building Effectiveness for your organisation and the arrangements you will put in place to ensure that your board/committee and senior management will have enough time to attend meetings and undertake the development activities to ensure you will achieve the objectives of your improvement plan. *(150 words max)*

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1. **Please explain what you hope to get out of this programme and why your organisation should be selected to take part? *(300 words max)***

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This is to confirm that we have read and noted the terms and conditions of participation in this programme and that our board/committee members and senior management (if relevant) are fully committed to engage with the process as described.

**This form should be signed by the Chair of Trustees/Management Committee and the Chief Executive**

*(If no Chief Executive then a senior manager can sign;*

Signed: ………………………………………………………. Date:

Name: Role:

Signed: ………………………………………………………. Date:

Name: Role:

Please send your completed signed form\* to [**louise.marron@hertscf.org.uk**](mailto:louise.marron@hertscf.org.uk)

**Deadline for applications: 5pm Friday 6th December 2019**

*(\*Please attach the original Word typed version together with a scanned signed copy)*