# ‘Here for Herefordshire Holidays’ (HAF) Programme

# Grant Application for Easter 2025

**22nd April – 27th April 2025**

**Name of organisation:** Click or tap here to enter text.

**Main contact and position held:** Click or tap here to enter text.

**Organisation address:** Click or tap here to enter text.

**Delivery venue address:** Click or tap here to enter text.

**Telephone:** Click or tap here to enter text.

**Email address:** Click or tap here to enter text.

**Website:** Click or tap here to enter text.

**Type of Organisation:**

Local Organisation ☐

Community/Voluntary Sector ☐

Not-for-Profit Company☐

Social Enterprise ☐

Registered Charity

Schools or Educational Setting

Constituted Group

Private Company (with a Social Objective)

Out of School Provider/Childcare

Other  Click or tap here to enter text.

**OFSTED registration number if applicable:** Click or tap here to enter text.

**Do you provide wraparound childcare?** Yes  No

**Have you received any grants within the last 6 months for similar projects?**

Yes  No

**If so, please give details:** Click or tap here to enter text.

**PROGRAMME DELIVERY INFORMATION:**

**PROGRAMME DELIVERY:**

**Please provide a brief example timetable of holiday activities provision (Monday–Friday or equivalent)**

**Monday:** Click or tap here to enter text.

**Tuesday:** Click or tap here to enter text.

**Wednesday:** Click or tap here to enter text.

**Thursday:** Click or tap here to enter text.

**Friday:** Click or tap here to enter text.

**Saturday:** Click or tap here to enter text.

**Sunday:** Click or tap here to enter text.

**Confirm how your programme will meet the key outcomes below:**

**Food provision:**

*See application information sheet* Click or tap here to enter text.

**Increase awareness of healthy eating, healthy lifestyles, and positive behaviours:**

*See application information sheet* Click or tap here to enter text.

**Physical activities:**

*See application information sheet* Click or tap here to enter text.

**Signposting and referrals and supporting families:**

*See application information sheet* Click or tap here to enter text.

**Accessibility & Inclusiveness:**

*See application information sheet* Click or tap here to enter text.

**Please describe how will you consider the environment and sustainability:**

e.g. recycled materials, re-use, equipment share, food waste

*See application information sheet* Click or tap here to enter text.

**Enriching Activities:**

Please state planned activities beyond your core offer that you may need help to fund? NB – only one activity a week

*See application information sheet* Click or tap here to enter text.

**Further information:**

**How will you market your provision to maximise attendance:**

*See application information sheet* Click or tap here to enter text.

**Will you be running HAF programmes during other holiday periods?**

Please indicate:Summer  Christmas

**Will you be offering Paid places?**

If so, how much will these places be advertised for?

Click or tap here to enter text.

**PROGRAMME DELIVERY EXPENDITURE:**

**What provision will you be offering?**

*(Please tick one only)*

Activity and food **£6.00** per hour per child

Meals will be produced onsite  Meals will be purchased

Activity only  **£5.00** per hour per child

**SESSION NUMBERS (please add one line per session. Add additional rows if required):**

| **Date of session** | **Number of children per session (including SEND)** | **Number of sessions per day** | **Times of session(s)** | **Age Group(s)** | **Total Cost Per Session** |
| --- | --- | --- | --- | --- | --- |
| **(Example)**  \* Sunday 24th Mar\* | 10 | 1 | 10-2 | 8+ | £200.00 (10x4hrsx£5/hr) |
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1. **Total Cost of Session:**

£ Click or tap here to enter text.

**B) Administration costs (Max 10% of total expenditure)** *See information sheet for what this entails and how much can be applied for*

£ Click or tap here to enter text.

1. **Enrichment activity costs – please list**

£ Click or tap here to enter text.

**D) Kit and equipment – please list**

£ Click or tap here to enter text.

**E) Any other additional Costs – please list:**

£ Click or tap here to enter text.

**Total Cost (A to E):**

£ Click or tap here to enter text.

**SEND Tariffs**

Tier 1 - Universal providers are expected to be able to provide for the majority of children including those with low-level SEND needs by making reasonable adjustments.

Tier 2 – Providers who can offer extra support for children, that require it, with an EHCP tariff A – C.  Additional hourly supplement can be applied.

Tier 3 – Providers who can offer enhanced support for children who require it, with an EHCP tariff D and above or special circumstances that have been previously agreed. Additional hourly supplement can be applied.

**Are you able to offer a place to children in tier 2 and above?**

Yes  No

**Please confirm which tier(s).**

**Please enter your hourly rate and how many spaces you can offer.**

**Usual hourly rate will be deducted:**

Tier 2  Click or tap here to enter text.

Tier 3  Click or tap here to enter text.

**Policies and Procedures**

**Please tick all the policies and assurances that the service has in place. Evidence will be required upon successful application.**

***NB: The HAF team can support you to achieve these***

1. Safeguarding Children Policy and Procedure
2. Health and Safety Policy and Procedure
3. Behaviour Policy and Procedure
4. Uncollected child Policy and Procedure
5. Adverse weather Policy and Procedure
6. Public Liability Insurance certificate
7. Copies of DBS Certificates or numbers – staff and volunteers
8. Safeguarding training certificates – staff and volunteers
9. First aid training certificates – staff and volunteers
10. Evidence of staff qualifications
11. Food Hygiene certificate and allergen training
12. Risk assessments for all planned activities including venue and emergency evacuation

| **Fraud Statement** |
| --- |
| By completing the application or accepting the grant payment, you are confirming that you are eligible for the grant.  If your eligibility circumstances change after making an application or receiving this funding, you must notify us immediately.  Herefordshire Council will not accept deliberate manipulation or fraud, and any instances will be actively investigated.  Any individual who falsifies their records or dishonestly provides inaccurate information to gain grant money will face prosecution.  The council reserves the right to recoup funds and claw back any grants paid in error.  The personal information we have collected from you will be shared with fraud prevention agencies who will use it to prevent fraud and money-laundering and to verify your identity.  If fraud is detected, you could be refused certain services, finance, or employment.  Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found on the Herefordshire Council website here:  [www.herefordshire.gov.uk/fraudprivacy](http://www.herefordshire.gov.uk/fraudprivacy) |

| **Important Notice – Data Protection** |
| --- |
| Herefordshire Council is the Data Controller under data protection law for any personal data provided by you and we will only use the information you provide on this form to administer, process and assess your application for funding under the Holiday and Activity Fund (HAF) Programme and to administer any funding if your application is successful. The legal basis for processing this data is that it is necessary for the performance of a contract with you or to take steps preparatory to such a contract.  Individuals have a number of rights under data protection law, including the right to request their information. You also have a right to make a complaint about our handling of your personal data to the Information Commissioner’s Office <https://ico.org.uk/>  We will keep your data once an application is approved and funding released for the period of 6 years as defined by the funding body.  Information may be shared with other persons or organisations helping us with the assessment and monitoring of applications. Information you provide may also be shared with government departments, agencies and third parties appointed in connection with the administration of this grant.  We may also advise you of other council services, which may benefit you.  Please tick here if you consent to your details being kept on a database for this purpose. I do consent |

**Declaration**

**Signatures are required from two people who are authorised to sign on behalf of your organisation and will usually be the Director/Chair plus one other senior member e.g. Treasurer. Please do not type your signature, electronic signatures are required.**

**I/we confirm that I/we have read and understood the Fraud Prevention Notice and confirm that the information contained within this application form is true and accurate.**

Name: Click or tap here to enter text. Position: Click or tap here to enter text.

Signature 1 Date: Click or tap to enter a date.

Name: Click or tap here to enter text. Position: Click or tap here to enter text.

Signature 2  Date: Click or tap to enter a date.

**Please note that you are signing on behalf or your organisation – we may require copies of minutes or other evidence to show that your organisation has agreed to undertake this project/activity**

**Please complete and return this form to:**

[**HAFproviders@herefordshire.gov.uk**](mailto:HAFproviders@herefordshire.gov.uk)