

**Please use the Let’s Build Health Grants Guidance Pack to help you complete this form**

**Purpose:** Let’s Build Health Grants are available to help create opportunities and develop local activity that improves health and wellbeing. We want to allocate funding for activities in the below neighbourhoods which will support the overall aims of the PKW programme, including (not exhaustive):

* Increased awareness of and involvement in community activities
* Increased range of activities for families and young people
* Increased range and uptake of volunteering opportunities
* Increased participation and awareness of the benefits of green space and physical activity
* Improved understanding of ways to live a healthy life

**People Keeping Well Funding Areas (Table 1):**

|  |  |  |
| --- | --- | --- |
| **East & West Ecclesfield** | **Shiregreen & Brightside** | **Southey** |
| * High Green * Chapeltown * Ecclesfield * Burncross | * Shiregreen * Lower Wincobank * Upper Wincobank * Brightside | * Parson Cross * Foxhill * Southey Green * Shirecliffe |

**Please note:** Each of the above PKW areas has an allocated budget. Therefore, any funded activity must only be delivered within its neighbourhoods or be primarily supporting people from those neighbourhoods, as per table 1.

**Submission:**

Please return completed forms by 19th January 2026. Send completed application forms either via email to [communities@soarcommunity.org.uk](mailto:communities@soarcommunity.org.uk) or by dropping off or posting to one of the below addresses:

|  |  |
| --- | --- |
| Let’s Build Health  SOAR Community  SOAR Works Enterprise Centre  14 Knutton Road  Sheffield. S5 9NU | Let’s Build Health  SOAR Community  Sorby House  42 Spital Hill  Sheffield. S4 7LG |

|  |
| --- |
| **Let’s Build Health Grant - Application Form** |

1. **Contact details**

|  |  |
| --- | --- |
| Name of Group/Organisation |  |
| Main Contact |  |
| Role in Group/Organisation |  |
| Phone Number |  |
| Email |  |
| Address |  |
| Is your group/organisation: | non-constituted  Constituted  Registered (state type): |

1. **About your Project**

|  |
| --- |
| 2.1 Where will this project take place? *Only one application per PKW Area (refer to Table 1)* |
|  |
| 2.2 Tell us a bit about your group/organisation? (Up to 300 words) |
|  |
| 2.3 What do you want to use the funding for? (Up to 500 words) |
|  |
| 2.4 How will this investment help to improve health & wellbeing and/or promote community cohesion? (Up to 500 words) |
|  |
| 2.5 Who will benefit from this project? (Up to 200 words) |
|  |

|  |  |
| --- | --- |
| 2.6 When will your project start and end? | |
| Start Date: |  |
| End Date: |  |

1. **Budget and Delivery**

How much money do you need and what will you spend it on? *Please do not ask for more than the available grant.*

|  |  |
| --- | --- |
| * 1. Breakdown of how the money will be spent:   (e.g venue hire, materials, facilitators, etc.) | |
| Item | Cost |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total** |  |

|  |
| --- |
| 3.2 How will you measure the success of your activity? |
|  |

1. **Non-Constituted Groups Only**

Do you have a supporting group or organisation that will host your funding?

**Yes**

**Please ask them to complete question 6 and then both group and host organisation sign the declaration in section 7**

**No**

Please contact [communities@soarcommunity.org.uk](mailto:communities@soarcommunity.org.uk) or call 0114 213 2591 so we can discuss and support you to connect with a supporting organisation and/or becoming constituted if this is what your group wants.

1. **Constituted or Registered Groups/Organisations Only**

Banking details:

|  |  |
| --- | --- |
| **Bank Name:** |  |
| **Account Name\*\*:** |  |
| **Sort Code Number:** |  |
| **Account Number** |  |

\*\* We can provide proof of bank details in the organisation’s name [e.g., a scan or a statement with no transaction details]

1. **Supporting Organisation Details (To be completed by the Funding Host):**

|  |  |
| --- | --- |
| **Name of Supporting Organisation** |  |
| **Name of Lead Contact:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |
| **Bank Name:** |  |
| **Account Name\*\*:** |  |
| **Sort Code Number:** |  |
| **Account Number:** |  |

**\*\*** We can provide proof of bank details in the organisation’s name [e.g., a scan or a statement with no transaction details]

1. **Declaration**

It is important that you understand and agree to sign up the following statements.

Please note that if you leave the group/organisation or can no longer fulfill your responsibilities, or someone else takes over responsibility for the investment on behalf of the group/organisation, you must inform us immediately.

1. We are authorised to make the application on behalf of the above group/organization
2. We certify that the information contained in this application is correct
3. We agree to provide all the information (monitoring) reasonable required by SOAR Community
4. We will make sure that we shall comply, at all times, with any relevant legislation and adopt good practice in ensuring safety measures within our project such as health and safety, insurance and DBS checks
5. We will make every reasonable effort to ensure that we take out appropriate insurance for the group and its activities, including public liability and insurance for equipment and we will produce documentary evidence that the policy or policies are properly maintained, if requested
6. We agree to abide by the terms and conditions outlined in the Investment Conditions **Declaration in Appendix 1**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of person submitting form |  | Role in group |  |
| Signature |  | Date |  |
| Name of Funding Host |  | Organisation of funding host |  |
| Signature |  | Date |  |

**Please submit to SOAR Communities via email**

[**communities@soarcommunity.org.uk**](mailto:communities@soarcommunity.org.uk) **by 12 noon 19th January 2026.**

**You will receive confirmation of receipt of application via email. If you have any questions, please contact the Grants Administrator via email**

**Appendix 1. Let’s Build Health Grant: North Sheffield Conditions Declaration**

|  |
| --- |
| Please read the following investment conditions – by signing the Declaration of the application form you are confirming that you have read and understood them. Please keep a copy of these conditions for your own records. |

**Conditions**

1. **Purpose of investment** The investment will be used for the sole purpose/s as stated on the application form. If we want to make any change to the activity or budget we will contact SOAR Community in advance to ask if this is possible, and then confirm the changes in writing. If for any reason this is not possible, the money must be returned to SOAR Community.
2. **Maintaining records** We will keep all receipts and records of expenditure after the end of our project.
3. **Assets** Any assets bought with a Let’s Build Health Grant cannot be sold, disposed of or given away to any other group or individual without prior approval in writing of SOAR Community.
4. **Reporting and monitoring** We will report on the progress and difference that we

make as requested.

1. **Legal Duties** We will make sure that we shall comply, at all times, with any relevant legislation and adopt good practice in ensuring safety measures within our project such as health and safety, insurance and DBS checks.
2. **Liability** The grant recipient accepts liability relating to the projects it undertakes and releases SOAR Community from any and all liability. Any grant awarded by SOAR Community will be done so on the basis of information supplied at the time of the application. If any information is subsequently found to be misleading, inaccurate or false then the grant must be paid back to SOAR Community in full

**7. Insurance** We will make every reasonable effort to ensure that we take out appropriate insurance for the group and its activities, including public liability and insurance for equipment and we will produce documentary evidence that the policy or policies are properly maintained, if requested.

1. **Publicity** We will share relevant publicity and documents with SOAR Community as the funders.