



**HULL4HEROES**  
SUPPORTING THOSE WHO HAVE SERVED



**VALOUR**

# Small Grants Fund Application Form

# VALOUR

Through VALOUR Veterans will be better supported across the UK through the provision of place-based Valour Recognised Centres. Each will provide a welcoming physical space to all veterans and have the ability to identify and address their needs as presented. Through strong developed networks each VALOUR Recognised Centre will harness the knowledge, experience and capability available across their locality to ensure a timely, safe and pro-active response with a no wrong door approach.

Here at Hull 4 Heroes, we are the VALOUR Recognised Centre (VRC) for Yorkshire & Humber commissioned through the Office for Veterans Affairs at the Ministry of Defence and we:

- Operate a fully accessible, non-clinical VRC in Hull, open six days per week, providing in person support for veterans and their families.
- Deliver welfare, housing and financial guidance through dedicated casework including complex needs support and crisis prevention.
- Provide specialist health and wellbeing navigation through a DMWS Welfare Officer, including hospital based and community support.
- Deliver employment, skills and transition support through partnerships with FTG and Hull University, including regular employment surgeries and targeted guidance.
- Coordinate and host multi-agency co-location sessions and partner-led clinics to ensure timely holistic support
- Implement regional outreach through collaboration with established organisations in priority locations during year one with mobile outreach introduced from year two to reach rural and coastal communities.
- Offer digital and remote access to services, including telephone, video consultations, secure messaging and a dedicated Valour landing page.
- Recruit, train and deploy volunteers as community connectors to extend reach into underserved communities.
- Manage a small grants programme to commission local organisations to deliver outreach and specialist activities where gaps are identified.

**Funding Available:** Up to £5,000

**Project Title**

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**Amount Requested**

£ \_\_\_\_\_

**Organisation Name**

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**Contact Name**

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**Position in Organisation**

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**Address**

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**Telephone**

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**Email**

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**Website (if applicable)**

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# Section 1: Organisation Information

## 1.1 Organisation Type

- ☐ Registered Charity
  - ☐ Community Group
  - ☐ Community Interest Company (CIC)
  - ☐ Social Enterprise
  - ☐ Other (please specify)
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## 1.2 When was your organisation established?

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## 1.3 Briefly describe your organisation and its activities (maximum 250 words)

## Section 2: Project Information

### 2.1 What is the name of the project?



### 2.2 What are you proposing to do?

Please provide a summary of the activities that will be delivered.

### 2.3 Why is this project needed?

Describe the local need or issue you are seeking to address.

## 2.4 Where will the project take place?

## 2.5 When will the project start and finish?

Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

End Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## 2.6 Who will benefit from the project?

- ☐ Older People
- ☐ Adults
- ☐ Young People
- ☐ People with Disabilities
- ☐ People Experiencing Mental Health Challenges
- ☐ People Living Alone
- ☐ Other

Please describe:

## Section 3: Outcome Areas

Please select all outcomes that apply to your project.

**Please provide 2 positive outcomes for your project**

**Any other – please specify**

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## Section 4: Expected Results

**What difference will your project make?**

Please provide details of the outcomes you expect to achieve.

| Outcome                                      | Target |
|----------------------------------------------|--------|
| Number of beneficiaries                      |        |
| Number of sessions delivered                 |        |
| Expected increase in community participation |        |
| Expected improvement in wellbeing            |        |
| Expected increase in physical activity       |        |
| Other – please specify                       |        |
|                                              |        |

Please provide any additional information:

## Section 5: Project Budget

### **Total Project Cost**

£ \_\_\_\_\_

### **Amount Requested from Small Grants Fund**

£ \_\_\_\_\_

### **Have you applied for or secured funding from any other source?**

☐ Yes

☐ No

If yes, please provide details.

## Budget Breakdown

| Item                | Cost (£) |
|---------------------|----------|
| Venue Hire          |          |
| Equipment           |          |
| Activity Costs      |          |
| Volunteer Expenses  |          |
| Marketing/Publicity |          |
| Other               |          |
| <b>Total</b>        |          |

Details:

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## Section 6: Monitoring and Evaluation

### How will you measure success?

Please describe how you will collect evidence of impact.

- ☐ Attendance Registers
- ☐ Participant Surveys
- ☐ Feedback Forms
- ☐ Case Studies
- ☐ Photographs
- ☐ Other

Details:

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## Section 7: Safeguarding and Risk Management

Do you have appropriate policies in place where required?

| Policy                     | Yes                      | No                       |
|----------------------------|--------------------------|--------------------------|
| Safeguarding               | <input type="checkbox"/> | <input type="checkbox"/> |
| Health & Safety            | <input type="checkbox"/> | <input type="checkbox"/> |
| Equality & Diversity       | <input type="checkbox"/> | <input type="checkbox"/> |
| Public Liability Insurance | <input type="checkbox"/> | <input type="checkbox"/> |

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## Section 8: Declaration

I certify that the information provided in this application is accurate and that any funding awarded will be used solely for the purposes described in this application. I also agree to submit outcome data for the purpose of reporting to the funder so that success may be shared.

**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Please return this form to – [colin.webb@hull4heroes.org.uk](mailto:colin.webb@hull4heroes.org.uk)**

*By submitting this form, you agree to provide Hull 4 Heroes with relevant activity and outcome data concerning beneficiaries from the Armed Forces community whom you support. This information may include personal data and will be used for reporting to the Office for Veterans' Affairs (OVA) as part of the VALOUR programme evaluation. It is the responsibility of the submitting organisation to ensure that informed consent has been obtained from each beneficiary prior to the sharing of any personal information.*

## Grant Assessment Scoring Matrix (Officer Use Only)

| Criteria                       | Weighting   | Score (1-5) |
|--------------------------------|-------------|-------------|
| Community Need                 | 20%         |             |
| Alignment to Priority Outcomes | 25%         |             |
| Value for Money                | 20%         |             |
| Deliverability                 | 20%         |             |
| Impact and Sustainability      | 15%         |             |
| <b>Total Score</b>             | <b>100%</b> |             |

### Funding Recommendation

☐ Approve

☐ Approve with Conditions

☐ Decline

Comments:

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Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Panel Chair: \_\_\_\_\_ Date: \_\_\_\_\_