

## **Non Fixture Related Grants Application Form**

10 South Colonnade, London E14 4PU Telephone: +44 (0)20 7333 0043 Email: grants.admin@hblb.org.uk

## For grants commencing in the twelve months after April 1st 2023

The Application Form is in three parts. Please refer to the supplied guidance notes for information on how to complete this form.

You will be required to complete two separate Adobe forms to build your grant application; the first form (Part A) is for the collection of summary information, and the second (Part B) must be completed for **each distinct strand of work activity** for which funding is being sought. You must also complete the Excel Budget template (Part C) showing the expenditure breakdown for the project and the proposed grant funding draw down schedule.

All completed forms and attachments must be submitted to <a href="mailto:grants.admin@hblb.org.uk">grants.admin@hblb.org.uk</a> by no later than 5pm on the closing date for applications as published on the HBLB website. **Please remember** that we are encouraging all applicants to submit their applications as soon as possible, so that HBLB staff can work with you on any areas of concern to enable you to resubmit if necessary before the final deadline.

If you have any queries on completing this form, please contact the HBLB Grants Team at grants.admin@hblb.org.uk.

Section A.1 – Applicant Details		
Title		optional
First Name		
Last Name		
Job Title		
Work Telephone No		
Mobile Telephone No		optional
Email Address		

Organisation Name		If applicable
Organisation Address line 1		
Organisation Address line 2		
Organisation Address line 3		
Organisation Address Post Code		
Number of employees		
Years in operation		
Governance Structure		Please describe the governance structure within your organisation including details of Board/Committees/Senior Leadership Team
Financial History	Yes:	Are you able to provide accounts f
	No:	the past 3 financial years if requested?

Please indicate the extent of impact which this funding will have on the following measures using the following descriptors:

- **High** Major contribution to the Racing Outcome leading to high impact
- Medium Considerable contribution to the Racing Outcomes leading to some measurable impact
- Low Minor contribution to the Racing Outcome but with little impact
- **Zero** The project/activity makes no contribution to the Racing Outcome

Please indicate the approximate percentage of the total expenditure budget allocated to activities which will impact on each of the Racing Outcomes.

RACING OUTCOME	IMPACT	PERCENTAGE OF TOTAL BUDGET
	IIVIFACI	TOTAL BODGET
Generate interest in Racing by an increase in:		
Horserace betting turnover from UK regulated bookmakers		
Crowd numbers at racecourses & TV viewing numbers		
Number of owners		
Number of horses in training		
Sustain valued employment in Racing by an increases in:		
Number of British-bred foals		
Number of vacancies filled in Racing's key roles		
Racing's diversity and inclusion		
People wellbeing		

RACING OUTCOME		IMPACT	PERCENTAGE OF TOTAL BUDGET
Drive high quality care and support	for the horse in Racing by a	n increase in:	
Horse	e welfare perception rating		
Impac	t of investment in research		
Continually enhance the reputation	n of Racing by an increase in	:	
Racing's	integrity perception rating		
Racing's contribution to reduc	=		
 Racing's favo	impacts purability perception rating		
Section A.4 – Previous/Other Fund	ling		
Has HBLB funding been previously applied for within the last 3 years	Yes: No:		
If yes was this for the same project or a different project. If a different project, please provide brief details			
Was previous application successful	Yes: No:		
If yes, please provide details of amount and date received			
Is funding for this project/activity being sought from anywhere other than HBLB	Yes: No:		
If yes, please provide details of potential funder, amount requested and when you will know if application has been successful			

Section A.5 – Details of project/activities to be funded			
Name of initiative			
Overall Project Summary (Maximum of 500 words)			
Why is the project needed			
Project Start Date (MM/YYYY)			
Project End Date (MM/YYYY)			
	Please complete the project.	e a Part B form fo	r each distinct strand/activity within
Section A.6 – Project Managemen	t		
Please give details of the individual(s) responsible for the delivery of the proposed activities. Please include details of any partner organisations			
Section A.7 – Project Risks			
Please list below the main risks (up to 10) to the project and the mitigations/measures taken to control them.			
Risk 1		Mitigation	
Risk 2		Mitigation	
Risk 3		Mitigation	
Risk 4		Mitigation	
Risk 5		Mitigation	
Risk 6		Mitigation	
Risk 7		Mitigation	
Risk 8		Mitigation	
Risk 9		Mitigation	
Risk 10		Mitigation	

Section A.8 – Financial Management		
Please provide details of the individual(s)		
responsible for the financial management of the		
project		
Please provide details of the processes and policies		
in place (or that will be put in place) for the		
financial management of the project and the grant		
funding from HBLB		
Section A.9 – Financial Information		
Total cost of project		
Total grant amount requested from HBLB		
Shortfall (if any)		
How will shortfall will be funded		
Details of shortfall funding already secured (organisation and amount)		
Details of shortfall funding requested		
(organisation, amount and date of funding		
decision)		
I have completed and attached the Budget Templa	te (Part C): Yes: No:	
Section A.10 - Sustainability		
Describe how the project will be sustained after the grant funding has ended.		
Section A.11 - Evaluation		
Please provide below details of how the project will be evaluated on completion or at end of grant term, whichever is the earliest. Evaluations must include the impact of the project, the value for money in the use of public funds, success against expected outcomes, and milestones.		
or public runus, success against expected outcomes	, and fillestories.	
Who will carry out the evaluation		

Section A.12 – Reference and Declaration	
Please provide details of two referees that HBLB may approach in relation to this application:	
Referee 1:	
Contact Name	
Contact Job Title	
Contact Email	
Organisation Name	
Referee 2:	
Contact Name	
Contact Job Title	
Contact Email	
Organisation Name	
Declaration	
	pplication is correct at the time of submission. I have read and s & conditions of the non-fixture related grants and confirm that I am .
Name	
Date	
Signature	