

# Expression of Interest

Stage 1 Application Form to the Communities' Choice PB Fund

## Introduction to the Communities' Choice Fund

**Communities' Choice** aims to empower local communities by giving them the opportunity to decide how public funds are allocated to the projects that matter most to them. Local **People Committees**, made up of residents from each community, will oversee the delivery of projects within their area.

#### The Process:

Upon submission of your Expression of Interest (EOI) form (Part 1), the People Committees will assess your application and *may* invite you to complete the Part 2 form, which will ask for more detailed information, including a budget breakdown. Both Part 1 and Part 2 must be submitted for your application to progress to the final assessment and public vote.

#### **Guidance:**

Please ensure all sections of this form are completed with clear and comprehensive information, as this will give you the best chance of being invited to complete Part 2 of the application for the **Communities' Choice Torfaen Participatory Budgeting (PB) Fund**. We strongly encourage you to read the **Our Priorities Report Application Guidance** documents before completing your application. These will give you an overview of the types of initiatives we aim to fund, in line with the priorities identified by local community members.

**Please note** that if you are submitting a cross-area application, you may apply for a maximum of £10,000 across the three Communities' Choice areas.



## 1. Communities' Choice Area:

Blaenavon	Thornhill &	Upper Cwmbrai	1	Trevethi	n, Penygarn & St. Cadocs
Do you intend to apply for	rfunding in more t	than one area?	Yes	No	
2. Applicant Inform	ation				
<b>Applicant Details</b>			Re	gistered	Address
Organisation Name:			No	. / Street:	
Position / Job Title:			Lo	cal Area:	
Contact Name:			Tov	vn / City:	
Email:			Co	unty:	
Phone Number:			Ро	stcode:	
3. Organisation Ty  Part A:	)E				
		☐ Charitable Incorporated Organisation		Organisation	□ Registered Charity
□ Voluntary / Community Group □ In		☐ Informal / Self-Help Group		p	☐ Private Business / Limited Compa
				_	
Part B:		Other (please	describ	e)	





#### 4. Priorities

## 4.1 Pick Your Main Project Theme:

		1
Priority 7	Theme:	-

**Project types:** - Please ensure that you have read the 'Our Priorities' Document thoroughly before submitting your application. This document outlines the priorities identified through the 'Have Your Say!' consultation and provides guidance on the types of initiatives that the community wishes to fund. You should refer to this document wherever possible in your application. While all applications will be considered, priority will be given to those that align with the project types listed.

### 4.2 Project Timeline

\*Approximate dates and timings are fine at this stage; however, if you are successful in Part 1 and progress to Part 2, you will be required to provide more definitive start and end dates.

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## 5. Project Details

Now tell us about your idea. You should consider how your project aligns with the identified priorities and contributes to the community's aspirations. Your submission should demonstrate a clear connection between your chosen theme, the proposed activities, and the anticipated impacts on health and wellbeing. It's essential to articulate the uniqueness of your project while addressing key aspects such as the timeline, expected outcomes, and how it fits within the funding criteria.

### 5.1 Project Title

Provide a concise and descriptive title for your project.





## 5.2 Project Summary

In a fo	ew sentences, summarise the main idea and purpose of your project. Explain what you aim to achieve and why it is important for ommunity. Please be concise and focus on the main elements of your project ( <b>maximum 250 words</b> ). If you are successful at 1, you will be required to provide a more detailed project plan within Part 2.
Part	r, you will be required to provide a more detailed project plan within Part 2.
<b>5.3</b>	Positive Outcomes
List a	t least one positive outcome or objective your project intends to achieve. You may refer to the Our Priorities & Application
Guida	ance documentation for ideas and inspiration.
1:	
2:	
3:	





# 6. Budget

Please provide the total cost of your project and the amount of funding you are requesting from the Communities' Choice Torfaen PB Fund. If you do not plan to access any other funding, please enter '0' for the total project costs.

Taria. If you do not plan to access any other fariality, please enter o for the total project costs.				
a) Total Projec	t Costs			
	<b>Total Project Cost:</b>		Amount Applied for:	
£		£		
*Please note that if	your application progres	ses to the next stage, you will be red	quired to provide a more detailed budg	get breakdown
b) Other Fundi	ng Sources			
	tional funding sources fo	r your project, including grants, don	ations, or in-kind contributions. Specif	y whether each
c) Rreak Down	for Cross-Area App	nlications		
If you are applying	for funding across more		details about the project logistics and	costs for each
	aenavon	Thornhill & Upper Cwmbra	n Trevethin, Penygarn & S	St. Cadocs
			, , , <b>, , , , , , , , , , , , , , , , </b>	





## 7. Alignment with Priorities

Please refer to the 'Our Priorities' guidance document. Propo	osals should align with one or more priority themes and clearly highligh
how your project fits with these theses and the types of initiative	, , ,
a) Alignment with the Marmot Principles	
Torfaen is a Marmot region. Please consider how your proje	ct aligns with the Marmot principles and tick one or more that apply
Reference: Wales First Marmot Region	
☐ My project helps give every child the best start in life	☐ My project enables all people to maximise their capabilities and have control over their lives
☐ My project creates fair employment and good work for all	☐ My project ensures a healthy standard of living for all
☐ My project builds healthy and sustainable communities	☐My project strengthens the role and impact of ill health prevention
b) Welsh Government's Well-being of Future Generations indicators  Please indicate which of the seven National Well-Being Goals of Reference: Wellbeing of Future Generations indicators	
☐ A prosperous Wales	☐ A resilient Wales
☐ A healthier Wales	☐ A more equal Wales
☐ A Wales of cohesive communities	☐ A Wales of vibrant culture and thriving Welsh language.
☐ A globally responsible Wales	





#### 8. Declarations & Consent:

By ticking signing, I confirm that I have read, understood and consent to the GDPR Policy

I hereby declare that the information provided in this EOI form is true and correct to the best of my knowledge. I understand that any false information may result in the rejection of this application.

Name:		Signature:		Date:	
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Please ensure that all sections of this form are completed accurately before submission. Incomplete forms may not be considered for assessment.

Thank you for your commitment to improving your community through the Communities' Choice Torfaen PB Fund.

## 9. Submitting Your Application

Applications can be submitted to <u>communities-choice@tvawales.org.uk</u> or alternatively, you may choose to upload your application via the form found here.

\*\*The deadline for part 1 Expression of Interest forms to be received is midnight on <u>Friday 1st August 2025</u>. Applications received after the deadline stated above will not be considered for part 2 of the application process.

#### 10.Contacts:

Dan Watkins	Bailey Richardson
Communities' Choice Coordinator	Youth & Community Support Worker
dan@tvawales.org.uk	bailey@tvawales.org.uk

