



PROJECT DELIVERY PLAN - DETAILED BUDGET BREAKDOWN

# Grant Application Form

**Part 2/2 Forms for the Communities' Choice grant.**

## Communities' Choice Fund Part 2 Form

Congratulations on reaching **Part 2** of the Communities' Choice grant process. The People's Committee has reviewed your Expression of Interest (EOI) and would now like more detail about your proposed project. The **Part 2** Application form is your opportunity to strengthen your application, so please be sure to complete all sections in full and ensure that you return the form by the agreed deadline. This application form requires you to add more detail to your original Expression of Interest form, including:

- A clear project delivery plan.
- A realistic, fully justified budget.
- Specific examples showing how your project addresses the community priorities you selected in **Part 1**.

You should also explain how your proposal supports the **Marmot Principles** and the goals of the **Well-being of Future Generations (Wales) Act**, using specific examples where possible.

Please complete every section of the form. Set out the actions you will take, anticipated outcomes, how you will engage your local community, how you will monitor impact, and how you will manage funds responsibly. Refer to your Part 1 EOI where helpful to ensure consistency. Please note that you should also attach copies of all required documents, including bank statements, copies of qualification certificates or your DBS certificate where appropriate.

The information you provide will be used by the People's Committee to decide which projects are recommended for the public vote at the Community Voting Event. You should refer to your Expression of Interest form to complete the Part 2 Application form effectively.



## 1. Part 2 Applicant Information

### 1.1 Communities' Choice Area Applied to:

**Area Selected:** Upper Cwmbran

**Unique Application Reference:** PBTUP001

### 1.2 Primary Contact Details

Applicant Details		Registered Address	
Organisation Name:	Able	No. / Street:	Nant Bran
Position / Job Title:	Chief executive officer	Local Area:	Upper Cwmbran
Contact Name:	Shaun O'Dwyer	Town / City:	Cwmbran
Email:	shaun@able.wales	County:	Torfaen
Phone number:	01633 960627	Postcode:	NP44 1SN

### 1.3 Bank Account & Registration Information

Bank Account Name	Able Radio	Bank Account Number	65319040	Sort Code	089299
<i>*For Registered Charities and Private Businesses only</i>		Registered Charity No.		Companies House Registration No.	06730986

## 2. Your Project in More Detail

### 2.1 Project Title

The title you have provided for your project is:

Able Life, My Life

### 2.2 Project Overview

Describe your project, its main purpose, target beneficiaries, and expected outcomes. State your project's specific objectives, using SMART objectives where possible. (*Suggested: 150 – 200 words*)



The project will focus on improving the health and well being of individuals engaged in the project through a catalog of opportunities, these will include multi sports sessions - improving physical health through exercise (archery, gentle exercise, adapted bike sessions and fitness suite sessions), health checks will be carried out at the beginning of the project via a health care professional.

Healthy eating sessions delivered in the ILS (independent living skills) kitchen at Able, ensuring all participants have access and opportunities in how to eat healthy and affordable meals, this will also include sessions on how to grow your own fruit and vegetables at the horticulture project at Able Cwmbran. The project will aim to achieve a positive outcome in the following areas: Inclusion and equal opportunities (ensuring that those with a disability have access to opportunities), support healthy lifestyles (encourage physical participation in exercise and sport), addressing social detriments to health (access to affordable and healthy food), improving communication and understanding (community engagement and person-centered opportunities)

## 2.3 Project Activities and Delivery Plan

- Outline the activities, services, or events your project will deliver.
- Key Milestones,

- Explain who will be responsible for delivering.

*(Suggested: 150 – 200 words)*

The support staff at Able who are suitable trained will support and deliver this project, we will work with exercise professionals to deliver the relevant programs such as multi-sports and suitably trained accessible bike instructors.

Adaptive Bike sessions – improving physical and mental health – Cwmbran Stadium – Halo Leisure / Able staff

Disability Gym Sessions – Cwmbran Stadium – Able staff / Halo Leisure

Healthy Eating sessions – ILS kitchen Able Cwmbran – Able staff and or Fedline CIC

Growing fruit and Vegetables – Able Cwmbran – Able staff

Multisport sessions – Newport / Cwmbran – Multisports CIC

Gentle exercise – Able Cwmbran – Able staff

## 2.4 Community Benefit and Impact

Explain clearly how your project will benefit your chosen community (Communities' Choice area)

- How the project responds to the top priorities identified.
- The short-term and long-term impacts you expect to meet for individuals, groups, and the wider community.

*(Suggested: 150 – 200 words)*

The project will address the following areas

1. A prosperous Wales – proving greater independence and opportunities through s reduction of social inequalities
2. A resilient Wales – greater independence and reliance on statutory services
3. A healthier Wales – improved health through healthy eating and exercise
4. A more equal Wales – ensuring those with protected characteristics have opportunities
5. A Wales of cohesive communities – Connecting communities

Short term impacts are expected to be; increased participation in physical activity, with a view to encourage to maintain this lifestyle independently, A more conscious and healthy lifestyle choice through food, with knowledge of how to make healthy meals with budgets, supported by person centred planning.

## 2.5 Collaborations and Partnerships

Identify any community centres, groups, or other partners with whom you will work. Describe their role(s) in the project and how this collaboration will add value. *(Suggested: 75 – 100 words)*

Able will work with – ABUHB (Care at home team) sending through patients that have an identified need from the Upper Cwmbran Locality (with protected characteristics)

Multisport CIC – will deliver multisport sessions – specialist in working with neurodivergent and those with physical impairments

Halo Leisure – Nonprofit leisure provider, providing staffing and facilities.

Part 2 Full Application Form



## 2.6 Risk Management and Feasibility

Identify any potential risks or challenges to delivering your project. Explain how you will manage or reduce these risks. (*Suggested: 50 – 75 words*)

Challenges around changing life style habits, this will be supported by positive person centered support and regular reviews with individuals, with the positive and correct method to encourage participation this riskl should be greatly reduced.

## 2.7 Alignment with Marmot Principles

Refer to the Marmot Principles and explain which principles your project supports and how. Give practical examples of how your activities promote these principles.

Marmot Principle	Ticked in Part 1	How your project contributes (practical example)
Give every child the best start in life		
Enable all to maximise capabilities & control		
Create fair employment & good work for all		
Ensure a healthy standard of living for all	x	Healthy cooking sessions and education
Create & develop healthy/sustainable places	x	Encouragement of positive relationships with food
Strengthen the role & impact of ill-health prevention	x	Gentle exercise mechanism

## 2.8 Wellbeing of Future Generations (WFG) Goals

Justify **only** those you ticked in Part 1.

WFG Goal	Part 1	Contribution (specific activity or outcome)
A Prosperous Wales		
A Resilient Wales		Encouragement of greater and or new sense of independence
A Healthier Wales		Healthy cooking lessons and education.



WFG Goal	Ticked in Part 1	Contribution (specific activity or outcome)
A More Equal Wales		Proving opportunities to individuals with protected characteristics
A Wales of Cohesive Communities		
A Wales of Vibrant Culture & Thriving Welsh Language		
A Globally Responsible Wales		

### 3. Project Timeline

Please provide a more definitive start and end date for your project and then enter the appropriate duration i.e. 3 months, 6 months, 12 months etc. If you are planning a one-off event, your timescale should consider the planning and execution of the event, taking the start date as when you will begin planning.

<b>Start Date:</b>	Oct 2025	<b>End Date:</b>	Oct 2026	<b>Duration:</b>	
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### 4. Budget and Cost Breakdown

Please give an estimate of each known project cost you have included in the total amount applied for. Categorise your budget into headings such as volunteer expenses, equipment and materials, venue hire, marketing and promotion, and other delivery costs.

	Expense Type	Notes	Cost (£)
1.	Multisport sessions	6 supported people changing weekly (total of 48 supported people) x1 multisport sessions for 52 weeks	£2,184
2.	Cooking sessions and ingredients	Total of 52 sessions with 10 supported people per sessions	£3,120
3.	Travel	£20 per week for 52 weeks	£1040
4.	Halo leisure facilities (adaptive bikes, hall hire gym)	Bike sessions at £3 per person Hall hire at £42 per hour)	£1,456
5.			
6.			
7.			



	Expense Type	Notes	Cost (£)
1.			
8.			
9.			
10.			

<b>Total (£)</b>	7800
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#### 4.1 Area-Specific Costs and Justification

If your project will operate across more than one PB area, the costs should be broken down – please complete Appendix A. (**PB 2.2 – Cross-Area Application Budget Template**). Explain any variations in cost between areas. Ensure you add this appendix when submitting your application.

#### 4.2 Additional Budget Information

Use this space to include any other information around in-kind contributions, match funding or other funding sources (*if applicable*). (Suggested: 100 – 150 words)

### Declarations

#### 4.3 Monitoring & Evaluation

I understand that if my project receives funding from Communities' Choice, I must take part in monitoring and evaluation as agreed. Failure to do so may result in funding being withdrawn or reclaimed.

#### 4.4 Attachments and Documents Checklist

Item Included with my Application	Tick to Confirm
• Constitution / Governing Document (Organisations)	x





Item Included with my Application	Tick to Confirm
• Equality & Inclusion Policy	x
• Safeguarding Policy (If Working with Vulnerable Groups)	x
• Data Protection / GDPR Policy	x
• Recent Bank Statement / Account Verification	x
• Insurance, DBS, and/or Qualification Certificates (If Applicable)	x
• Public Liability Insurance	x

#### 4.5 Declaration Statements:

My Statements	Tick to Confirm
• I consent to the Communities' Choice team withdrawing this application at its discretion if necessary.	x
• The information in this application is true and accurate.	x
• I agree to the GDPR policy and consent to scrutiny/scoring/monitoring by the People's Committee, Communities' Choice team, TVA staff, and the Senior Operational Working Group.	x
• Image to Represent my project (Logo/Other Image for use in promoting your project and for the Community Voting Event)	x
• I confirm that other funding sources that may be accessed to support the delivery of this project will be declared prior to acceptance of grant (terms and conditions of the grant)	x

#### Community Voting Event Attendance

Communities' Choice is a Participatory Budgeting initiative. All funding decisions for the Communities' Choice grant will be determined by residents during a Community Voting Event held within the relevant area. By submitting this form, ***you acknowledge your obligation to attend and present your project to the community at the designated event(s). Failure to attend, unless acceptable prior notice is provided, may result in disqualification from the process.*** The Communities' Choice team retains the authority to withdraw applications at its discretion.

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

<b>Name:</b>	Shaun ODwyer	<b>Signature:</b>	S O'DWYER	<b>Date:</b>	9/9/25
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Please ensure that all sections of this form are completed accurately before submission. Incomplete forms may not be considered for funding. Thank you for your commitment to improving your community through the Communities' Choice Torfaen PB Fund.

## 5. Submitting Your Application

Applications must be submitted to [communities-choice@tvawales.org.uk](mailto:communities-choice@tvawales.org.uk) by the deadline date: **Wednesday, 10<sup>th</sup> September 2025**. Applications arriving after the pre-agreed deadline may not be considered. If you feel you will not be able to complete the form in full by the agreed date you must contact the Communities' Choice team to provide a valid reason at the earliest convenience. All supporting documentation should be attached with your application.

## 6. Contacts:

### **Dan Watkins**

Communities' Choice Coordinator  
[dan@tvawales.org.uk](mailto:dan@tvawales.org.uk)

### **Bailey Richardson**

Youth & Community Support Worker  
[bailey@tvawales.org.uk](mailto:bailey@tvawales.org.uk)