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**The Gannochy Trust Youth Panel Fund**

**Grant Report Form**

Measuring the impact of our funding is important to the Gannochy Trust and to the Youth Panel members. The information you share with us will contribute to the Trust’s learning and understanding of what we have achieved, and the difference that we have made, as a funder**.**

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| **ORGANISATIONAL INFORMATION** |

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| **Legal name of organisation:** |  |
| **Name that you are known by:**  (if different to above) |  |
| **Name of Main Contact:** |  |
| **Position held:** |  |
| **Main Contact address:** |  |
| **Main Contact email:** |  |
| **Main Contact telephone:** |  |

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| **1. PURPOSE/NAME OF PROJECT:** |
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| **2. FUNDING PERIOD COVERED BY THIS REPORT:** | | | |
| **Start Date:** |  | **End Date:** |  |

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| **3. AMOUNT OF FUNDING RECEIVED:** | |
| **Amount:** |  |

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| **4. THE GANNOCHY TRUST YOUTH PANEL FUND OUTCOME/S YOU APPLIED UNDER:** | |
| **YOUTH ACTIVITY** | |
| * Providing groups of young people with the opportunity to experience travel and new environments (Care experienced young people need not travel as part of a group) |  |
| * Providing a safe place for young people to meet and socialise |  |
| * Opportunities for young people to explore music and/or art |  |
| * Activity that delivers positive environmental change |  |
| **YOUTH VOICE** | |
| * Empowering young people and ensuring that their voices are heard |  |
| * Supporting youth leadership in local communities |  |
| **YOUTH HEALTH & WELLBEING** | |
| * Provision of free or affordable meals |  |
| * Development of independent living skills |  |
| * Activity that is focused on improving mental health |  |
| * Improved access to the outdoors |  |

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| **5. DIRECT BENEFIARIES:**  **The Direct Beneficiary numbers you identified in your application have been inserted below. Please provide the actual**  **number supported during the funding period covered by this report, in the age categories given below.** | | |
|  | **TARGET** | **ACTUAL** |
| * 11 – 21 Years |  |  |
| * 22 – 26 Years |  |  |
| **TOTAL** |  |  |

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| **6. WHAT WAS DELIVERED:**  **Please tell us about the activities/service you delivered and the difference our funding helped you make. You may wish to attach or include links to: reports you have prepared for other funders relating to the activity; photographs; feedback; case studies; video clips. Please indicate whether the outcomes selected in 4 above were achieved.**  **(UP TO 300 WORDS)** |
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| **7. LEARNING AND ADAPTIONS:**  **Most projects come up against unexpected challenges, and we would like you to tell us about any problems you**  **encountered that slowed progress or stopped the outcomes happening. How did you deal with this? Any unexpected**  **outcomes, positive or negative? What would you do differently in the future? (UP TO 150 WORDS)** |
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| **ACTUAL FINANCIAL REPORT** |

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| **8. Please include the total project income and expenditure with reference to the budget submitted.**  **We do not require you to send us invoices.** | | |
|  | **Budget** | **Actual** |
| **TOTAL EXPENDITURE** | **£** | **£** |
| **TOTAL INCOME** | **£** | **£** |
| **UNDERSPEND/OVERSPEND** | **£** | **£** |
| **ANY COMMENTS YOU WOULD LIKE TO MAKE ON THE FINANCIAL REPORT:** | | |
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| **9. ARE THERE ANY OTHER COMMENTS OR FEEDBACK NOT COVERED ABOVE THAT YOU WOULD LIKE TO SHARE WITH US?**  **(UP TO 250 WORDS)** |
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| **DECLARATION AND DATA PROTECTION** |

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| **10. DECLARATION** |
| I confirm that I am authorised to submit this report and authorise The Gannochy Trust to:   * publish details of the organisation and the financial support provided by The Gannochy Trust * pass any details obtained about the organisation through the application or subsequent assessment procedures or reports to external agencies, including other grant-making bodies * use such information as part of any survey or evaluation undertaken by The Gannochy Trust * publish details as part of any press release or publication   I understand that if any of the information I have provided is later found to be false or misleading, any subsequent offer(s) of funding, or agreed staged payments, may be suspended or withdrawn. |

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| **SIGNATURE OF BOARD MEMBER OR CEO:** | |
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| **Print Name:** |  |
| **Position Held:** |  |
| **Date:** |  |

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| **11. DATA PROTECTION** |
| In submitting this form you are confirming that any individuals identified in your application have given you their agreement and permission to pass any personal information to The Gannochy Trust. Personal information will be held in accordance with the Trust’s Privacy Policy which can be found on the Trust’s website at [www.gannochytrust.org.uk](http://www.gannochytrust.org.uk) under ‘About Us’.  The Gannochy Trust will use the information that you have provided to us for the purposes of paying, managing or monitoring any grant awarded, related administration or research purposes, and may share relevant information with other organisations to use in their own assessment of applications and managing or monitoring grants. |

# Your completed report and accompanying documents should be submitted to grants@gannochytrust.org.uk

# If you have any queries please do not hesitate to contact:

# The Gannochy Trust, Pitcullen Crescent, Perth, PH2 7HX Tel: 01738 620653

# Scottish Charity Number: SC003133