

Cronfa Cefnogi Cymunedau Gwynedd

Gwynedd Community Support Fund

Ffurflen Gais / Application Form 2024.25

**DYCHWELWCH Y FFURFLEN HON I** [**CistGwynedd@gwynedd.llyw.cymru**](mailto:CistGwynedd@gwynedd.llyw.cymru)

**RETURN THIS FORM TO: CistGwynedd@gwynedd.llyw.cymru.**

Nodwch: \*Mae'n well gennym dderbyn eich cais ar e-bost, os yw hynny'n bosib /*Please note: \*We prefer to receive your application by e-mail, if possible.*

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*Please note: \*We prefer to receive your application by e-mail, if possible.*

**neu drwy ei hanfon i'r cyfeiriad post isod / or by sending it to the following postal address: -**

**Gwasanaeth Economi ac Adfywio Cymunedol/**

**Economy and Community Regeneration Service**

**Defnydd Swyddfa / Office Use**

Rhif Cyf / Ref No: .......................................................

Dyddiad Derbyn / Date Received: .............................

**Cyngor Gwynedd/Gwynedd Council,**

**Swyddfeydd y Cyngor/Council Offices,**

**Caernarfon,**

**Gwynedd,**

**LL55 1SH**

(Ffôn / Tel. 01286 679 870)

**Darllenwch y canllawiau ymgeisio yn ofalus cyn cwblhau'r ffurflen hon ac atebwch bob cwestiwn.**

***Please read the application guidelines carefully before completing this form and please answer every question.***

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| **CWESTIWN 1 / QUESTION 1** | |
| 1. Teitl y cynllun:   *Project title:* |  |
| 1. Enw’r grŵp:   *Name of group:* |  |
| 1. Enw’r prif gyswllt :   *Name of main contact:* |  |
| 4. Swydd o fewn y grŵp:  *Position within the group:* |  |
| 5. Cyfeiriad yn (cynnwys cod post):  *Address (including post code):* |  |
| 6. Rhif ffôn:  *Phone number:* |  |
| 7. E-bost:  *Email:* |  |

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| **CWESTIWN 2 / QUESTION 2** | |
| **Beth yw natur eich grŵp?** ❑ Grŵp cymunedol cyfansoddedig / *Constituted community group*  ***What is the nature of your group?*** ❑ Elusen gofrestredig / *Registered charity*  ❑ Cwmni cydweithredol / *Co-operative company*  ❑ Cwmni cyfyngedig trwy warant / *Company limited by guarantee*    **❑ Arall / *Other***  **Rhif elusen neu rif cofrestr arall (os yn berthnasol)**  Charity number or other registration number (if applicable)  **Pryd sefydlwyd eich grŵp?**  When was your group established ?  **Oes gan eich grŵp gyfrif banc yn ei enw sydd angen llofnod dau berson**  **i awdurdodi taliad?***/**Does the group have a bank account in its name*  *which requires two signatories to authorise payment?*❑ Oes / *Yes* ❑ Nag oes / *No* |  |
| **Ydi eich grwp yn adhawlio TAW? Ydi/Nac ydi**  *Does your group reclaim VAT? Yes/No*  **Os ydych yn cyflogi staff, nodwch faint:**  *If you employ staff, please indicate how many.* |  |
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| **CWESTIWN 3 / QUESTION 3** | | |
| 1. Disgrifiwch beth yw prif amcanion a gweithgareddau eich grŵp:   *Outline the main aims and activities of your group:* | | |

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| 1. Os ydych yn gweithio gyda phlant neu oedolion bregus, nodwch pa gamau a gymerir i’w diogelu:   *If you work with children and vulnerable adults please inform us of the measures taken to protect them:* |

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| **CWESTIWN 4 / QUESTION 4** |
| Rhowch ddisgrifiad o’r cynllun gan nodi yn benodol beth fyddwch yn ei wneud gyda’r **grant hwn**:  *Please describe the project and note specifically what will be done with* ***this grant*** *:* |

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| **CWESTIWN 5 / QUESTION 5** |
| **a) Sut y gallwch brofi bod angen am y prosiect?**  *How can you prove the need for the project?*  (Dylid son am waith ymgynghori sydd wedi digwydd gyda’r gymuned a pa gefnogaeth sydd wedi ei dderbyn i’r prosiect /  *You should mention details of any community consultation carried out and what support the project has received)*    *b)* **Sut y byddwch yn rheoli eich cynllun ac yn ei gynnal wedi i arian y grant ddod i ben**  *How will you manage the project and be able to sustain your scheme after the grant funding ceases?* |

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| **CWESTIWN 6 / QUESTION 6** |
| **Manylion ffeithiol amrywiol /** Various factual details     1. **Dyddiad cychwyn a gorffen y prosiect. (\*Nid yw’r gronfa yn gallu ad-dalu unrhyw wariant sydd wedi digwydd cyn dyddiad llythyr cynnig/dyddiad dechrau’r prosiect.)**   *Project start and finish date. (\*The fund cannot re-imburse any expenditure that has taken place prior to the offer letter/project start date.)*   1. **Oes angen Caniatâd Cynllunio? Oes/Na**   *Is there a need for Planning Permission? Yes/No*   1. **Oes angen cymeradwyaeth Rheoliadau Adeiladu? Oes/Na**   *Is there a need for Building Regulations consent? Yes/No* |

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| **CWESTIWN 7 / QUESTION 7**  **Gwariant blwyddyn ariannol / Expenditure 2023.24 financial year .** | | **Nodwch enw’r cyd ariannwyr eraill yn y bylchau gwag isod /Please note the other match funders in the boxes below.** | | | | | |
| **Enw’r eitem a’r gost llawn.**  ***Nam of item and full cost.*** | | **Cronfa Cefnogi Cymunedau**  ***Community Support Fund*** |  |  |  |  | **Cyfanswm**  ***Total*** |
| **1** | **£** |  |  |  |  |  | **£** |
| **2.** | **£** |  |  |  |  |  | **£** |
| **3.** | **£** |  |  |  |  |  | **£** |
| **4.** | **£** |  |  |  |  |  | **£** |
| **5.** | **£** |  |  |  |  |  | **£** |
| **6.** | **£** |  |  |  |  |  | **£** |
| **Cyfanswm**  ***Total*** | **£** | **£** | **£** | **£** | **£** | **£** | **£** |
| **Statws y cydariannu**  ***Match funding status*** |  |  | **Wedi sicrhau**  ***Secured*** q  **Heb sicrhau**  ***Not secured*** q  **Cais wedi ei gyflwyno**  ***Application submitted*** q | **Wedi sicrhau**  ***Secured*** q  **Heb sicrhau**  ***Not secured*** q  **Cais wedi ei gyflwyno**  ***Application submitted*** q | **Wedi sicrhau**  ***Secured*** q  **Heb sicrhau**  ***Not secured*** q  **Cais wedi ei gyflwyno**  ***Application submitted*** q | **Wedi sicrhau**  ***Secured*** q  **Heb sicrhau**  ***Not secured*** q  **Cais wedi ei gyflwyno**  ***Application submitted*** q |  |

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| **CWESTIWN 8 / QUESTION 8** | |
| **Oes gan y grŵp bolisi iaith sy’n ymrwymo i sicrhau gwasanaeth dwyieithog i’r cyhoedd?** */ Does your group have a policy that ensures a bilingual service to the public?* | q Oes / *Yes* q Nag oes / *No* |
| **Os nad oes, amlinellwch, isod, sut y byddwch yn defnyddio’r grant i sicrhau gwasanaethau dwyieithog i’r cyhoedd? Gall hyn gynnwys eich gwasanaethau (a chyfarfodydd) wyneb yn wyneb neu dros y ffôn, deunydd printiedig, arwyddion a thudalennau gwefan.**  *If not, please outline below how you’ll use the grant to ensure a bilingual service to the public? This can include your group’s phone and/or face-to-face services (and meetings), printed information, signs and web pages.* | |

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| **CWESTIWN 9 / QUESTION 9** | |
| **Oes gan eich grŵp bolisi cydraddoldeb sy’n ymrwymo i sicrhau cydraddoldeb i ddefnyddwyr a staff ar sail iaith, hil, rhyw, anabledd, cyfeiriadedd rhywiol, crefydd neu gred, oedran, ail-bennu rhywiol ac i briodas neu bartneriaeth sifil, beichiogrwydd a mamolaeth?**  *Does your group have an equality policy which is committed to ensuring equality to all staff and users on the basis of language, race, disability, sexual orientation, religion or belief, age, gender reassignment, civil partnership and pregnancy and maternity?* | q Oes / *Yes* q Nag oes / *No* |
| **Os nad oes, nodwch sut mae’r grŵp a’r cynllun yn sicrhau cyfle a mynediad cyfartal i bawb, gan ystyried pob un o’r elfennau cydraddoldeb perthnasol uchod:**  *If not, please state how the group and project ensures equal access and opportunities to all, taking into consideration all of the relevant elements of equality from those mentioned above:* | |

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| **CWESTIWN 10 / QUESTION 10** |
| Nodwch **yn gryno** sut fydd eich cynllun yn bodloni un neu ragor o amcanion y gronfa hon (gweler y Canllawiau). Bydd eich cais yn cael ei sgorio ar sail yr wybodaeth yma. **Nid oes rhaid i’ch cynllun ymateb i bob un o’r amcanion isod er mwyn llwyddo, ond awgrymir eich bod yn cynnig tystiolaeth ar gyfer pob amcan dilys er mwyn anelu i gyrraedd sgôr uchel.**  *Please state* ***concisely*** *how the project will meet one or more of the aims of this grant (see Guidelines). Your application will be scored against this information.* ***Your scheme does not need to achieve all of these objectives but in order to achieve a high score we would advise you to offer evidence for each relevant aim:***   1. **Annog cymunedau i gymryd rol mwy rhagweithiol yn eu hardaloedd***.*   *Encourage communities to take a more proactive role in their areas*   1. **Adnabod ac ymateb i anghenion cymdeithasol, ieithyddol a diwylliannol y gymuned**   *Recognise and respond to the social, linguistic and cultural needs of communities****.***   1. **Hybu buddsoddiad a datblygiad yr economi leol**   *Promote investment and develop the local economy*   1. **Gwella lleoliadau sy’n bwysig i gymunedau**   *Improve facilities that are important to communities*   1. ***C*ynyddu cyfleoedd gwaith, datblygiad sgiliau ymhlith unigolion o fewn cymunedau a hybu cyfle cyfartal i bawb**.   *Increase employment opportunities, develop skills amongst individuals in our communities and promote equality of opportunity for all.*   1. **Cefnogi gwirfoddolwyr a hyrwyddo cyfleoedd gwirfoddoli**   *Support volunteers and promote volunteering opportunities*   1. **Annog, gwarchod a chyfoethogi’r amgylchedd** *Encourage protection and enrichment of the environment.* |

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| **CWESTIWN 11 / QUESTION 11** | | | |
| Nodwch isod y targedau y byddwch yn eu cyrraedd wrth gyflawni’r cynllun hwn:  *Please indicate below the targets you will achieve on completion of this project:* | | | **Targed / *Target*** |
|  | **Nifer o wasanaethau newydd a ddarperir cefnogwyd neu warchodwyd**  *Number of new services provided, supported or safeguarded* | |  |
|  | **Nifer o swyddi a grëir.**  *Number of new jobs created* | |  |
|  | **Nifer o asedau a ddatblygir**  *Number of assets developed* | |  |
|  | Allbynnau eraill (nodwch) / *Other outcomes (note)*: | |  |
|  | Allbynnau eraill (nodwch) / *Other outcomes (note)*: | |  |
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| **DATGANIAD SWM LLAWN O GYMORTH GWLADWRIAETH/DECLERATION OF FULL SUM OF STATE SUPPORT**  **(Plis llenwch fewn y ffurflen Gymraeg isod neu Saesneg./ Please fill in either the Welsh or English form.)** | | | |
| **FFurflen Gymraeg**  Darperir y grant yma o dan Isafswm Cymorth Ariannol (ICA) Deddf Rheoli Cymhorthdal (2022) Nid yw'r cyllid yn cwmpasu mwy na £315,000 dros gyfnod cyllidol o dair blynedd fel 'Isafswm Cymorth Ariannol (ICA), yn unol â'r Ddeddf Rheoli Cymhorthdal (2022).  **Felly, er mwyn cadarnhau eich bod yn gallu cael y cymorth hwn, fel y nodir yn adran 36(1) o'r Ddeddf Rheoli Cymhorthdal (2022) rhaid i chi felly ddatgan swm llawn o gymorth Cymorth Gwladwriaeth yr UE *de Minimus/SAFA/SPEI/ICA*  rydych chi wedi’i gael yn ystod y 36 mis diwethaf.**  Bydd gofyn i bob busnes / sefydliad sy’n ceisio cefnogaeth gydnabod y rheolau a gwneud yn siŵr na fydd y cymorth a roddir dan y rhaglen hon yn uwch na’r uchafswm cymorth a ellir ei roi i sefydliad dan y rheoliadau hyn.  **.NAILL AI.:** Rwy’n datgan mai dyma’r symiau o gymorthCymorth Gwladwriaeth yr UE *de**Minimus****/***SAFA/SPEI/ICA a gafodd y sefydliad yn y tair blynedd diwethaf (mi fydd unrhyw lythyr cynnig grant yn nodi pa gymorth sydd wedi ei roi)   |  |  |  |  | | --- | --- | --- | --- | | **Blwyddyn:** | **Blwyddyn:** | **Blwyddyn:** | **CYFANSWM** | | **Swm:** | **Swm:** | **Swm:** |  | | **Corff / Cyrff Ariannu:** | **Corff / Cyrff Ariannu:** | **Corff / Cyrff Ariannu:** |  |  |  |  | | --- | --- | | **.NEU.:** Rwy’n datgan nad yw’r busnes hwn wedi cael unrhyw Gymorth Gwladwriaeth yr UE *de Minimis/SAFA/SPEI/MFA yn ystod y 3 blynedd diwethaf*  *(ticiwch y bocs)* |  |   Rhaid i ni gael y wybodaeth yma er mwyn gwneud yn siŵr:   * Nad yw’r cymorth a roddir, wrth ei gyfuno â chymorth de-minimis arall y mae eich sefydliad wedi’i gael yn y 3 blynedd diwethaf yn fwy na £315,000. * Na fydd eich sefydliad yn cael cymorthICA/SPEImewn unrhyw gyfnod o dair blynedd pe byddai, wrth ei gyfuno â’r cymorth a roddwyd, yn fwy na £315,000.   Mae’n rhaid i chi gadw cofnodion am gymorth ICA unigol am 3 mlynedd o’r dyddiad y’i rhoddwyd.  Os yw'r swm grant hwn yn fwy na £100,000, mae'n ddarostyngedig i'r gofynion tryloywder, ac yn golygu ein bod ni fel Awdurdod Cyhoeddus yn gorfod cynnwys manylion y grant ar y gronfa ddata rheoli cymhorthdal domestig.  **DATGANIAD – I’W LENWI GAN YR YMGEISYDD**  **Rwy’n datgan bod y wybodaeth a roddais yn gywir. Rwy’n deall y bydd rhaid i mi ad-dalu unrhyw gymorth ariannol a roddir neu na fydd taliadau yn y dyfodol yn cael eu talu os darganfyddir bod y wybodaeth yma’n anghywir.**  **Enw’r Busnes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Enw (Printiwch) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Llofnod \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Swydd\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dyddiad\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **English Form:**  This Funding is provided under the Minimum Financial Assistance (MFA) of the Subsidy Control Act (2022) The funding covers no more than £315,000 over a three-year fiscal period as ‘Minimum Financial Assistance (MFA), in accordance with the Subsidy Control Act (2022)  **To confirm that you are able to receive this assistance, as specified in section 36(1) of the Subsidy Control Act (2022) you must therefore declare the full amount of EU State Aid *de Minimis*/SAFA/SPEI/MFA you have already received over the last 36 months.**  All businesses/ organisations seeking support will be required to acknowledge the rules and that the aid provided under this programme will not exceed the maximum aid that can be provided to an organisation under these regulations.  **.EITHER.** **:** I declare that the amount of EU State Aid *de Minimis/SAFA/SPEI/MFA*  received by the organisation over the last three years was (any previous grant offer letter will state which/if any aid has been provided)   |  |  |  |  | | --- | --- | --- | --- | | **Year:** | **Year:** | **Year:** | **TOTAL** | | **Amount:** | **Amount:** | **Amount:** |  | | **Funding body(ies):** | **Funding body(ies):** | **Funding body(ies):** |  |  |  |  | | --- | --- | | **.OR.** **:** I declare that this business has not received any EU State Aid *de Minimis/SAFA/SPEI/MFA* aid during the last 3 years*(please tick)* |  |   This information is required to ascertain -   * The assistance received does not when combined with other de Minimis aid received by your organisation in the last 3 years exceed £315,000 * Your organisation will not accept MFA/SPEI aid in any three-year period, such that when it is combined with the assistance given it would exceed the limit of £315,000 max.   You are required to maintain records regarding individual MFA aid for 3 years from the date, which it is granted. If this grant amount is exceeds £100,000, it is subject to the transparency requirements, and means that we as a Public Authority must include details of the grant on the domestic subsidy control database.  **DECLARATION - TO BE COMPLETED BY THE APPLICANT**  **Business Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Name (Print ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Datganiad o Awdurdod / Decleration of Authority**  **Rwyf yn cadarnhau ar ran y grŵp sydd yn cyflwyno’r cais yma fy mod â’r awdurdod i gyflwyno’r cais. Mae'r holl wybodaeth ar y ffurflen yma, hyd eithaf fy ngwybodaeth, yn wir ac yn gywir. Rwyf yn deall y bydd rhaid gwario’r grant yn unol â thelerau ac amodau’r cynnig ac os na chedwir at yr amodau mae’n bosib bydd rhaid ad-dalu’r grant yn rhannol neu yn gyfan gwbl.**  *I confirm on behalf of the group that I have the authority to submit this application and that all information provided in the application, to my knowledge, is correct and true. I understand that the grant will have to be spent in accordance with the terms and conditions of the offer and that failure to conform to these terms and conditions may result in the grant having to be repaid, either partially or in full.* | | | | ........................................................................................................................ |
| **Enw’r prif berson cyswllt:**  *Name of main contact person:* | | ........................................................................................................................ | |
| **Enw aelod arall o’r pwyllgor:**  *Name of other committee member:* | | ........................................................................................................................ | |
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Rhestr Wirio

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| **Cwblhewch y rhestr wirio hon a’i gyrru drwy e-bost i CistGwynedd@gwynedd.llyw.cymru a gofalu fod y cais yn gyflawn.** |
| ***Pob cais:*** |
| q Mae pob cwestiwn wedi ei ateb  q Cadwyd copi o’r ffurflen er eich gwybodaeth chi |
| ***Rydych wedi amgáu: ar e-bost neu yrru yn y post.*** |
| q Copi o gyfansoddiad y grŵp wedi ei arwyddo a’i ddyddio  q Copïau o ddatganiadau banc mwyaf diweddar y grŵp ( ar gyfer pob cyfrif).  q Tystiolaeth o unrhyw gyfraniadau eraill tuag at y cynllun. (tystiolaeth o arian cyfatebol y cynllun). Cwblhau’r Ffurflen Datganiad Cymorth Gwladwriaeth.  q Llythyrau cefnogaeth a thystiolaeth o angen.    q Copïau o amcan brisiau / dyfynbrisiau ar gyfer costau’r cynllun.    q Tystiolaeth o fudd cyfreithiol mewn eiddo (les neu weithredoedd), os yn berthnasol.    q Tystiolaeth o ganiatâd cynllunio **neu** dystiolaeth ysgrifenedig gan yr awdurdod perthnasol yn cadarnhau nad oes  angen caniatâd cynllunio ( os yn berthnasol).  Tystiolaeth cymeradwyaeth Rheoliadau Adeiladu **neu** dystiolaeth ysgrifenedig gan yr awdurdod perthnasol yn  cadarnhau nad oes angen cymeradwyaeth Rheoliadau Adeiladu (os yn berthnasol).  Diolch |

Checklist

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| **Complete this checklist and send via email to** [**cistgwynedd@gwynedd.llyw.cymru**](mailto:cistgwynedd@gwynedd.llyw.cymru) **and ensure that the application is complete.** |
| ***All applications:*** |
| q All questions have been answered  q A copy has been kept for your own information |
| ***You have enclosed:*** |
| q A signed and dated copy of the group’s constitution  q Copies of the group’s most recent bank statements (for every account)  q Evidence of other contribution towards the scheme (match funding evidence). You have completed the State Aid Declaration form.  q Letters of support and evidence of need    q Copies of estimates / quotes for the costs of the scheme.  q Location plan / drawing, if relevant.  q Evidence of legal interest in property (lease or deeds), if relevant.    q Evidence of planning permission **or** written evidence from the relevant authority confirming that planning  permission is not required, if relevant.  q Evidence of Building Regulations approval **or** written evidence from the relevant authority confirming that  Building Regulations approval is not needed, if relevant.  Thank you |