

Ready to Rise Application

Before starting this application, you should confirm that you meet all the eligibility criteria.

If you have accessibility requirements that mean the following form is inaccessible, please contact us either by phone on 07706350018 or by email at jacky@firstport.org.uk or emmaives.dr@gmail.com and we will look for an alternative method of application.

Section One: Eligibility

X – I am aged 18 or over.

X – I am permanently resident in the UK.

X – My idea will operate primarily for the benefit of people or communities in Scotland.

X – My idea and its activities **do not** involve political campaigning or the advancement of religion.

X – My idea is not already up and running.

X – I am developing the idea independently or with the help of a small team. I am **not** applying on behalf of an existing, established organisation.

X – I am able to spend the award budget and report on the project within 6 months.

X – I have not received funding from Firstport for another idea within the last 10 years.

Section Two: About You

Preferred Pronoun:

First Name:

Last Name:

Email:

Phone Number:

Mobile Number:

House Name / Number and Street Name:

City:

Postcode:

Local Authority Area:

Date of Birth:

X – Please tick this box if you have any accessibility requirements.

Please provide details of any accessibility requirements here:

Section Three: About Your Idea

Name of idea:

Which sector is most relevant to your idea?

Where are the main beneficiaries of your idea located?

Please provide us with a short introduction to your idea:

Tell us about yourself:

Does your idea have the potential to generate income?

What is the positive change or social impact of your idea?

How will you show success?

Please upload the referrer statement here:

Section Four: Budget Breakdown

Please outline how you plan to spend the Ready to Rise Fund award. Please note that the total should **not** exceed £1,000.

Item 1:

Item 1 Amount: £

Item 2:

Item 2 Amount: £

Item 3:

Item 3 Amount: £

Item 4:

Item 4 Amount: £

Item 5:

Item 5 Amount: £

Item 6:

Item 6 Amount: £

X – Please tick this box if you also plan to use money from other sources.

Source 1:

Source 1 Expense:

Source 1 Amount: £

Source 2:

Source 2 Expense:

Source 2 Amount: £

Section Five: Bank Details

Please note that we fund the individual through the Ready to Rise Fund, so we need your personal bank details here.

Please also ensure that you have double-checked these details. If the account number or sort code is incorrect, it may delay the payment of a successful application.

Bank Account Name:

Account Name:

Sort Code:

Section Six: Equal Opportunities

All our staff, clients, partners, suppliers, and any other person we work with must follow our equal opportunities policy and not discriminate against anyone for any reason.

Please help us monitor this policy by providing the following details. We will only use this information for statistical purposes and it will not form part of your application assessment.

How would you describe your gender?

If you prefer to self-identify, please provide details below:

Do you identify as Trans?

How would you describe your sexuality?

Age Band

X - Tick this box if you identify as disabled

Please give details of your disability here:

Ethnicity

Ethnicity Details

Employment Status

Qualifications

If your enterprise is led by individuals who identify themselves with the following protected characteristics, please tick the relevant box(es):

X - Ethnic Minority Led

X - Disability Led

X - LGBTQ+ Led

X - Women Led

Beneficiaries

Does / will your enterprise target any of the following areas or protected groups?

X - Older People

X - Younger People

X - Disability

X - Gender

X - Race

X - Sexual Orientation and / or gender identity

X – Other

Section Seven: Submit

We will keep the information provided within this application on file for a period of ten years. It will then be deleted after the publication of Firstport's annual accounts. This is in line with HMRC requirements.

X – Tick this box to confirm that you understand and accept our obligations under the General Data Protection Regulation (GDPR) as set out in our [Privacy Policy](#).

CAPTCHA

Date of Application