

## **Approved list for annual contributions to support research, prevention and treatment (SR 3.1.1)**

### **Information Form**

This form is to be completed by all those seeking to be on the list of organisations to which gambling businesses may direct annual financial contributions to deliver or support research into the prevention and treatment of gambling-related harms, harm prevention approaches and treatment for those harmed by gambling from January 2020 (LCCP social responsibility code provision 3.1.1).

If you have any queries about the form and how to complete it, please contact [safergambling@gamblingcommission.gov.uk](mailto:safergambling@gamblingcommission.gov.uk) quoting 'LCCP RET Approved List' in the subject line. Completed forms should also be sent to this email address.

Section 1	Organisation and contact details
Section 2	Governance details
Section 3	Role in research, prevention or treatment to reduce gambling harms
Section 4	Commitment to working in collaboration under the National Strategy
Section 5	Information declaration

## Section 1 – Organisation and contact details

### 1a Full details of the organisation and lead contact person

Name of organisation

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### 1b Full name of the designated contact. All future correspondence will be directed to this person.

Title

--

First name(s)

--

Surname

--

Property name

--

Street

--

Town/city

--

Postcode

--

Country

--

Daytime phone number

--

Mobile telephone number

--

Email

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**2 Please state the nature of independent oversight or regulation of the organisation.**

For example, this may be through the Charities Commission, the National Audit Office, the Care Quality Commission, or another Independent Standards Body or Regulator.

**Name of regulator or other body****Registration/license number (if applicable)**


### Section 3 – Role in research, prevention or treatment of gambling harms

**3a Which elements of research, prevention or treatment does the organisation deliver or support in Britain?**

**Please check the box like this** ☒

Research into the prevention and treatment of gambling-related harms ☐

Harm prevention approaches ☐

Treatment for those harmed by gambling ☐

**3b Please describe your role in delivering or commissioning each of the functions of research, prevention or treatment to reduce gambling harms that you have checked in question 3a.**

## Section 4 – Commitment to working in collaboration under the National Strategy

**4a** By accepting contributions from licensed operators which meet the requirement to make an annual financial contribution to one or more bodies which deliver or support research into the prevention and treatment of gambling-related harms, harm prevention approaches and treatment for those harmed by gambling, the organisation commits to:

- a. using contributions solely for the purpose of reducing gambling harms;
- b. collaborating under the *National Strategy to Reduce Gambling Harms* to:
  - prioritise actions
  - coordinate activity; and
  - minimise duplication or conflict of activity.
- c. upholding the principles of the Strategy by taking:
  - an evidence-based approach
  - evaluating impact; and
  - supporting transparency.
- d. working within the structures of the Strategy to engage with people with lived experience; and
- e. providing information as requested to support the coordination and delivery of actions under the Strategy.

**4b** By signing the box below you are confirming the organisation's commitment to the statement above.

Name

Signature


**5 Information declaration:**

I certify to the best of my/our knowledge and belief that the information given is complete and correct in every respect.

I understand that any misrepresentation or failure to reveal information may be deemed sufficient cause for the organisation to be refused or removed from the list of bodies to which gambling businesses may make financial contributions in order to meet the LCCP requirement.

I understand that I must provide information about changes to the information outlined above to the Gambling Commission as soon as reasonably possible.

First name(s)	
Surname	
Signature	
Position in organisation	
Date	