

In partnership with Family Services at

 

Space 2 Grow Children and Young People’s Fund

Eighth round of funding - Summer 2019

APPLICATION FORM

**Young Barnet Foundation Vision**

**Where Barnet as one community, invests in all our children and young people, ensuring that they have opportunities for fun, growth, connection, success and celebration - helping today’s children become tomorrow’s confident, successful adults.**

**INVEST - CONNECT - GROW**

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| **Section 1: Project Snapshot** |

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| **Project name** |  |

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| **Organisation name** (if this application is on behalf of more than one organisation please put the name of the **lead organisation.** The other organisations applying should complete our **Form 2a – Additional applicants**) |  |

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| **Amount being applied for (max £10,000)** | **£** |

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| **Is the amount for full or part funding of the project?** |  **Full / Part** |

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| **Estimated start date of project**  | **Month** |
| **Estimated end date of project** | **Month** |
| **Total no of weeks** | **Weeks** |
| **Total no of sessions**  |  |
| **Regularity of sessions (i.e. one off, daily, weekly etc)** |  |

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| **Estimated number of participants per session (Ave)** |  |
| **Estimated no of unique participants** |  |
| **Estimated total no of participants (No of Sessions x No of participants per session)** |  |

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| **Length of each session** | **hours** |

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| **Age range of participants (tick all that apply)** |
| 0-4 (Pre School) |  | 5-11 (Primary) |  |
| 12-16 (secondary) |  | 17-18 (6th form or College) |  |
| 19+ (Post formal education) |  |  |

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| **When will the project be delivered** |
| During school hours in term time  |  | In school holiday periods |  |
| After school hours in term time |  | Weekends |  |

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| **The application seeks to address one or more of the following aims of the fund (Tick all that apply)** |
| Development emotional wellbeing and resilience |  | Enhance social inclusion (making all participants within a society valued and important) |  |
| Can support young people at transitional periods.  |  | Deliver therapeutic activity |  |
| Can demonstrate social engagement (e.g. supporting individual participation in activites, building social relationships) |  |  |

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| **Category (pick one only, that best fits your project)** See list at end of this application form.  |
| Category Reference Number:   |  |  |

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| **Section 2: About You** |

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| **Contact name** |  |

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| **Email**  |  |

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| --- | --- |
| **Telephone number**  |  |

**Organisational Type**

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| **Charity or CIO** |  | **Charity number** |  |
| **Parish Council** |  |  |
| **Constituted Group** |  |  |
| **CIC** |  |  |
| **Company Ltd by Guarantee** |  | **Company number** |  |
| **Other (provide information)** |  |  |

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| **Are additional organisations involved in this project?**  | Yes / No (if Yes then please list below) |
| **Note: A Form 2a must be submitted with this application for all additional organisations.****Use additional paper if there are more than 5 additional organisations** |  |
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| **For internal Use Only****Date received: Checked by:** **Comments:** |

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| **Section 3: Your Project****Proposal Details.** **Please limit your answers to be within the maximum number of words requested**  |
|  | Tips: Keep responses as short as possible Where possible use bullet pointsThe word limit is as a maximum guide, you do not need to use it all. |
|  |  | **Internal Use Score** |
| **1** | **Describe your project** (Max 200 words) |  |  |
| **2** | **Describe how your project will directly deliver against the Young Barnet Foundation vision and aims** (Max 200 words) |  |  |
| **3** | **Please outline how your project will:****Develop emotional wellbeing & resilience** **And/or****Enhance Social Inclusion** **And/or** **Support young people at transitional periods** **And/or** **deliver therapeutic activity** **And/or** **demonstrate social engagement**(Max 250 Words) |  |  |
| **4** | **Describe how the project will deliver against at least one of the application key criteria of:****Meeting Emerging need****And/or****Piloting a new initiative****And/or** **Upscale an existing project****And/or** **Collaborate with other YBF member organisations****And/or** **Demonstrate urgent need for your participants.** (Max 500 words) |  |  |
| **5** | **Demonstrate how the project/service is youth led/designed.**  (Max 200 words) |  |  |
| **6** | **How will you deliver your project?** *Please explain involvement of any project partners and their roles*(Max 250 words) |  |  |
| **7** | **Outline where your participants will come from and how you feel you can guarantee that you will get attendees to this project**(Max 250 words) |  |  |
| **8** | **Geographical location** | **Ward(s) in which project will be delivered:****Ward(s) participants will be from:**  |  |
| **Internal Use only:** *Any comments for notes.* |
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| **Section 4: Monitoring & Evaluation** |
| **The Monitoring and Evaluation (M&E) of your project are important for you to assess that your project is achieving what it set out to do. It also provides evidence of your success for you to use in your future funding applications.** **Young Barnet Foundation uses your M&E reports in the following ways:** * **To ensure that we’re investing in organisations and projects that are making a clear and positive difference to young people in Barnet**
* **As evidence to help attract more funding into the Space 2 Grow fund.**
 |
|  | We will ask you to collect the following quantitative data:* Total number of sessions held
* Total cumulative number of attendees at the project (attendees per session x number of sessions held)
* Total number of unique participants
* Age range of participants
* Total cumulative number of contact hours
* Split of male and female participants (approx. %)

We will also ask the following:We will ask you to outline in less than 150 words the key achievement of the project.We will ask for a quote from at least one participantWe will also for a quote from at least one session leader You will be asked to inform us of any pathways or continuation.An anonymous case study on one young personTo submit at least one photo pf your project (with relevant permission of any young people shown in shot)  |
|  |
| **9** | **Will you be using Upshot to collect your data?** **If no, what system/how will you be collecting your data?** | Yes / No |  |
| **10** | **Confirmation to comply with the M&E requirements listed above** | Yes / No |  |

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| **Section 5:** **Funding Requirements and Sources (to the nearest £)** |
| **11** | **Item or activity** | **Cost £** | **Amount requested from the Space 2 Grow Children and Young People Fund £** |
| **Staff costs** |  |  |
| **Activity costs** |  |  |
| **Volunteer expenses** |  |  |
| **Equipment costs** |  |  |
| **Any other costs** |  |  |
| **Total** |  |  |
| **Where not applicable – leave blank. A full breakdown can be attached to support this section.** |
| **12** | **Please describe any contribution you and/or your partners are making towards this project stating the following** | **Source of funding** |  |
| **Amount in £** |  |
| **Confirmed Y/N** |  |
| **If no, when will you hear?** |  |
| **13** | **Please describe how you have calculated your costs and provide any additional evidence (quotes etc.) where necessary** |  |
| **14** | **Please confirm the total project cost (£)** |  |
| **15** | **Please confirm the amount requested from the Space2Grow Children and Young People Fund (£)** |  |
| **Internal Use only** | **Score** |

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| **Section 6: Declaration** |

**I confirm, to the best of my knowledge and belief, all the information in this application is true and correct. I understand that you may ask for additional information at any stage of the application process.**

**I confirm that I am responsible for my project and will comply with relevant legislation to ensure safe practices and policies are adhered to for both staff and participants of my project.**

**I confirm that the organisation’s bank account has at least two signatories attached for payments.**

**(On partnership bids, lead organisation signs on behalf of all)**

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| **Name**  |  |
| **Position** |  |
| **Date** |  |

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| **Documents to include in your bid** | **Yes / No / NA** |
| **Your organisation’s governing document or constitution** |  |
| **Two years of latest approved accounts (speak to the Young Barnet Foundation Grants Officer prior to submission if this is not available).** |  |
| **Safeguarding Policy** |  |
| **Insurance – Please give details of your insurance and attach copies** INSURANCEEmployer’s Liability (if the applicant has any employees as defined under the Employers Liability (Compulsory Insurance) Act 1969)Public Liability (minimum limit of indemnity £2,000,000)  |  |
| **Community Interest Companies only:** |  |
| **Memorandums or Articles of Association** |  |
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**Please do not hesitate to contact us if you need clarification on any question in this form.**

**Tel: 0203 621 6090 or email** grants@youngbarnetfoundation.org.uk

**ONCE COMPLETE: Please email this form and any other relevant documents to:** grants@youngbarnetfoundation.org.uk

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| **Space2Grow Application Category** |

Enter this category reference into the last question of **Section 1: Project Summary.**

Where your project fits more than one category please choose the most applicable.

