



Youth activities for young people aged 13-19 years

SMALL GRANTS APPLICATION FORM 2011/12 – Round 2

PLEASE ENSURE YOU HAVE READ THE 'SMALL GRANTS GUIDANCE NOTES' BEFORE COMPLETING THE APPLICATION FORM.

1. Contact Details

Name of organisation applying for Small Grant:

Are you a member of the Youth Provider Network: YES NO

Is your organisation a registered charity YES NO Other please specify
Registration number _____

Contact details

Name of lead contact

Tel: (Day):

Tel (Evening):

Email Address:

The ward your organisation based

Address for Correspondence:

Address of project (if different)

Post Code:

Post Code:

2. Aims and Activities of the Organisation

In brief please describe the main aims and objectives of your organisation

3. Programme Area

Which programme area are you applying for? Please refer to the Small Grants Guidance Notes.
Select one Activity per application form.

	Activity	Value £
1.	<input type="checkbox"/> Sports project	2000
2.	<input type="checkbox"/> Music & Multimedia projects	2000
3.	<input type="checkbox"/> Creative Arts project	2000
4.	<input type="checkbox"/> Residential or day trips	2000
5.	<input type="checkbox"/> Enterprise/entrepreneurial project	2000
6.	<input type="checkbox"/> Generic activities (excl. transport cost)	1500
7.	<input type="checkbox"/> *Equipment	300

*separate application form must be in conjunction with an activity

4. Purpose of the Grant

Please provide an outline of the project/activity including days/time of delivery (attach timetable if necessary)

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Provide details of young peoples achievements (outcomes), how the project/activity will be monitored and evaluated

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Duration:

Start date:

Completion date:

How will young people be involved in the planning and delivering of the project?

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Full address where programme will be delivered

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How does the application meet the Aims and Priorities of the Small Grant Funding programme. (Please refer to the Small Grants Guidance Notes)

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5. Outcomes and Achievements

Tell us how your project/activity meet at lease one or more of the outcome listed below. (Please refer to the example in the Small Grants Information leaflet)

Outcome	Project/Activity (provide details how it meets selected outcome, how it will be monitored and evaluated)
Be Healthy	
Stay Safe	
Enjoy and achieve	
Make a positive contribution	
Achieve economic wellbeing	

6. Information about the Beneficiaries of this Grant

Please provide details of the total number of young people who will benefit from this grant.

How many young people in each range:

11-12 years

13-19 years

*20-25 years

Number of males

Number of females

Excluding participants

No. of volunteers:

13-19 years

*20-25 years

Other

Ethnic breakdown: Please provide the total number of participants from each category**Asian or Asian British**

Indian

Pakistani

Bangladeshi:

Other Asian Background

Black or Black British

Caribbean

African

Other Black background

Mixed Heritage

White & Black Caribbean

White & Black African

White & Asian

White

White British

White Irish

Other White Background

Other (please specify)

How many participants are Southwark Residents

*living with a disability or learning difficulty

Please use this section to provide us with a breakdown on how the grant will be spent.

Project Forecast			
Subsistence			AMOUNT
TOTAL			£0.00
EQUIPMENT			AMOUNT
TOTAL			£0.00
ACTIVITIES			AMOUNT
TOTAL			£0
STAFFING	No. of days	Rate per hour	AMOUNT
<i>Example 1</i>	3	£10 x 2 hours	£60
TOTAL			
TRANSPORT COST			
TOTAL			
OTHERS (DETAIL)			
TOTAL			
GRAND TOTAL			

SMALL GRANTS APPLICATION CHECK LIST

Please ensure that you have:



Answered **all** the questions



Attached a project breakdown (Please refer to question 9)



Retained a copy of the completed application form



Attached your organisation's policies and procedures

Return completed application forms and all supporting documents for the attention of: Maxine Gordon, Grants Monitoring Officer (Youth)

By hand: Youth, Commissioning & IAG
Southwark Children's Services
4th Floor (hub 2)
160 Tooley Street
London SE1 2QH

Email: maxine.gordon@southwark.gov.uk

Post: London Borough of Southwark
Youth, Commissioning & IAG
Children's Services
PO Box 64529
London SE1P 5LX