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**Supplementary Schools Network Fund (SSNF) 2020│Application**

\*Before completing the application form please read the accompanying guidance notes carefully, to ensure that you meet all eligibility criteria.

**Section 1: Personal and Organisation Details**

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| Name of Organisation  |  |
| Name of Lead Contact and Position |  |
| Address |  |
| Email  |  |
| Phone |  |
| Alternative contact name:  |  |
| Email |  |
| Phone  |  |
| Legal Status |  |
| Charity Number (if applicable)  |  |
| Annual income 2019/20 £ |  |
| Website  |  |
| Social Media  |  |
| YCF member:  | Yes: [ ]  No: [ ]  Just applied: [ ]  |
| Amount Being Applied for (Max £3,000) | £ |

**NRCSE Quality Mark**

|  |  |
| --- | --- |
| **Description** |  |
| Are you an NRCSE Member?  | No [ ]  Yes [ ]  |
| Has your organisation achieve the new NRCSE Quality Mark (if yes please add date) | No [ ]  Yes [ ]  |
| If you have started on your NRCSE Quality Mark please explain at what stage you are at: |  |
| Does your organisation have an independent bank account, requiring 2 signatories for authorisation  | No [ ]  Yes [ ]  |
| Are all Staff DBS Checked? If not, please say by when do you plan to have the DBSs ready.  | No [ ]  Yes [ ]  |
| Have you conducted a Covid 19 risk assessment recently? | No [ ]  Yes [ ]  |
| Does your organisation hold any other quality marks? If yes, please say the name and when it was achieved.  |  |

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| Please provide a short description of your supplementary school and the type of classes/activities you run currently. (*250 words maximum)* |  |
| Please give us a description of all the beneficiaries of your organisation. Age, gender and any other information you consider relevant. |  |
| How many people are in the management committee? |  |
| How many staff does the organisation employ? | Full time:  | Part time: |
| How many volunteers does the organisation have? |  |

**Section 2: The activity/project**

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| **2.1 What will your organisation use this funding for? Please provide an overview**.*Please describe the activities which the grant will make possible. What will you do? How often? What are the changes you want to see in the young people? Will the activities be face to face or online?*  |  |
| Which core subjects will your project cover? | Mathematics [ ]  Science [ ]  English [ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| What is the start and finish date for this project?  | Start date:End Date:  |
| **From the list below, please choose and tick the outcomes that may apply to your project.** **Tick what applies and explain how this will be achieved.** |
| This project will raise young people’s and children’s aspirations |[ ]
| Improve confidence and self-esteem |[ ]
| Support children and young people to have a healthy sense of identity |[ ]
| Core curriculum teaching |[ ]
| Cultural engagement and achievement |[ ]
| Partnerships with schools and youth settings in Camden |[ ]
| Peer to peer support |[ ]
| Engaging Parents |[ ]

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| **2.2 How many children and young people will benefit from your project and activities?** |
| Total number of young people and children: (please specify if this is per term, year, week) |  |
| Total number of young people and children per session: |  |
| Age range: |  |
| Estimated number of girls: |  |
| Estimated number of boys: |  |
| Number of young people and children with special needs: |  |
| Other unrepresented groups you aim to engage (please describe):  |  |
| Total number and length of sessions that you plan to run with this grant.  |  |

Tick all that apply

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| **2.3 What core thematic areas will this fund be used to teach?** | **Tick** |
| English |[ ]
| Maths |[ ]
| Science |[ ]
| Other (please explain) |  |

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| **2.4 Where will you deliver the activities? (Include address and type of building i.e. school, church hall, Community Centre, TRA hall, or other. If this activities will be on-line please explain)** |
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| **2.5 What other activities will be delivered?**  |
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| **2.6 How will your beneficiaries know about your project? (Include any promotional materials)** |
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| **2.7 How have you involved parents, children and young people in the decision making for this project and activities?**  |
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| **2.8 Do you have a plan to train staff and volunteers and what does that include?** |
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| **2.9 Do you attend the Camden Council supplementary schools forum? (please tick)**  |
| Yes [ ]  No [ ]  |

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| **2.10 Do you plan to work collaboratively with other supplementary schools? If so, please explain how.** |
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| **2.11 How will you monitor and evaluate outcomes for your project?**  |
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**Section 3: Budget**

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| **3.1 BUDGET OUTLINE** |
| Please tell us what your organisation would spend the funding on.

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| **Item** | **Description of expenditure***What is the cost? How many?* | **Amount** |
| 1 |  Staff costs |   |
| 2 |  Venue Costs |   |
| 3 |  Equipment Costs |   |
|  | *Please list* any other expenditure |   |
| 4 |   |   |
| 5 |   |   |
| 6 |   |   |
| Total |  |   |

Any notes/additional comments: |
| OTHER FUNDING |
| Please list any other funding or grants you have received within the past 12 months.*Please tell us what the funding was for, and how much was received.* |  |

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| **3.2 How will you keep a record of spending?**  |
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| **3.3 What is your plan for the longer-term sustainability of the project? Or how do you expect to fund the project in the future?** |
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**Please ensure that you attach the following documents to your application; your application will not be assessed until these documents have been received:**

|  |  |
| --- | --- |
| **Document:** | **Tick if Attached:** |
| Copy of your organisations’ constitution  |[ ]
| Recent copy of a bank statement |[ ]
| Safeguarding Policy (*including online safeguarding if you have it, otherwise please ensure you develop or review your existent policy to include online safeguarding policy and procedures before running your project, contact us if you will need help with this)* |[ ]
| Data Protection-GDPR policy  |[ ]
| Copy of your quality mark letter of approval or any other document/email/e document to show that you have either achieved the NRCSE quality mark or that you are an NRCSE member.  |[ ]
| If providing face-to-face activities please add a copy of your risk assessment. |[ ]

Once completed, please return form to: grants@youngcamdenfoundation.org.uk

If you have any difficulties completing or submitting this form, please email the address above.

Applications close on **Friday 04 December 2020**.