When you have completed this form please submit it with your Eligibility Statement and relevant documentation to: [**CSF@leics.pcc.pnn.gov.uk**](mailto:CSF@leics.pcc.pnn.gov.uk)

Please ensure you have adhered to the word limits for each question. Anything written beyond these limits will be disregarded and not taken into consideration.

|  |  |
| --- | --- |
| **Contact details** | |
| **Organisation name:** |  |
| **Project name:** |  |
| **Contact name:** |  |
| **Organisation Address:** |  |
| **Email:** |  |
| **Phone number:** |  |
| **Social media account(s) and webpage:** |  |
| **Amount of funding applied for 1 year:** |  |
| **Delivery location and geographic reach of service** |  |
| **What will the funding be used for:**  [Image result for information i symbol](http://www.google.co.uk/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0ahUKEwjK3dfIwLrSAhUCwBQKHf6aDBwQjRwIBw&url=http://arebeexlua.wikia.com/wiki/File:Information_Symbol.png&psig=AFQjCNGWjC6z3sRKtzfcCkywV6_4phBJSQ&ust=1488636306805232)Please put an X in one of the boxes and explain your reasoning below | 1.For a new initiative |
| 2.To expand existing services |
| 3.Replacement funding |
| **Data Protection 2018** | Should you be successful, do you consent for the OPCC to hold your contact information for 3 financial years from the point of award?  Yes  No |
| **How did you hear about this funding?** |  |

|  |  |
| --- | --- |
| **Project details** | |
| **1. What problem or need will your project address?**  Please describe the need or problem.  Your response should:   1. Clearly define the problem or need and relate it to an element of the Police and Crime Plan (PCP). Demonstrate how the project will meet the objective of the PCP. 2. Identify the local demographic of people whom this problem affects/who have this need. Please provide evidence to demonstrate this need. This can be quantitative (figures and data) or qualitative (a narrative based on community engagement and consultation)   Word limit 500 words max  (High) |  |
| **2. What will your project do?**  Please provide a project plan that includes mobilisation, key milestones, named persons of responsibility, delivery location and key activities.  Your plan should clearly set out:   1. What will be delivered/provided and how frequently 2. Who will deliver/provide it 3. What resources are required to deliver the project 4. When the key activities will take place (including days of the week and timings)   Word limit 500 words max  (High) |  |
| **3. How will you demonstrate that your project has been successful?**  Please describe the impact your project will have. Your response should clearly set out:   1. Who you expect to impact with your project 2. What the impact of the project will be 3. How you will measure this impact   Word limit 400 words max  (Medium) |  |
| **4. What relevant experience do you have that will be beneficial for this project?**  Please describe your skill set or experience in delivering similar projects, which will enable you to deliver this project successfully.  Your response should set out:   1. Any previous experience in delivering a project or initiative. Include details of when this took place, any relevant stakeholders, and the target audience. Please demonstrate the success of this project or initiative, including evidence, and detail how this was measured.   OR  The relevant skill set and personal experience within your organisation which would enable you to deliver this project. Please detail how these skills will enable you to do so.  Word limit 400 words max  (High) |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **5. Please provide a breakdown of the costs of your project**  Please show how the funding will be used using Table A. This should reflect the components of the project that are dependent on OPCC funding.  Your response should also demonstrate value for money.  If your project is being co-funded i.e. with another party then please provide these costs in Table B.  (Medium) | **Table A:**  The costs below are provided as a guide, please populate as relevant and add additional costs as required. If you plan to purchase equipment or resources with this funding, please submit any quotations along with this application.   |  |  |  | | --- | --- | --- | | **What** | **Breakdown** | **Cost** | | **Management Cost** |  |  | | **Personnel Cost** |  |  | | **Equipment** |  |  | | **Resources** |  |  | | **Installation** |  |  | | **Training** |  |  | | **Marketing** |  |  | | **Venue** |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | **Grand Total** |  |  |   **Table B:**  Please provide a breakdown below of any components of the project that are reliant on additional funding being acquired (not from the OPCC). Should you not be successful in acquiring this funding, please explain the impact this may have on the project and any mitigations you may enact.   |  |  |  | | --- | --- | --- | | **What** | **Breakdown** | **Cost** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | **Grand Total** |  |  |  |  | | --- | | **Table B response:** |  |  | | --- | | **How does this project offer good value for money?** | |