**Wiltshire Music Connect Development Fund**

**Application Form**

Please read the relevant criteria carefully and then complete this form.

* **Responses to some questions will determine an application’s eligibility**. Ineligible applications will not be scored.
* **Applications will be screened for eligibility**. Please note that unless you submit a full and complete application by the deadline, our team cannot assess it and it will be rejected.
* **Eligible applications will be scored and assessed by a small panel** drawn together by Wiltshire Music Connect. Panel members will be required to declare any potential conflicts of interest or partiality.
* **Decisions will be made based on the quality of applications and also the range / balance / location of the different activity** that can be supported in each funding round.
* **All applicants will be informed of decisions relating to their applications in a timely manner** - should funding not be awarded, this will include constructive feedback within our Team’s capacity
* **As this fund is only open to Associates for Wiltshire Music Connect**(who have therefore met Safeguarding criteria)**no further Safeguarding or referee information is necessary** at this stage. If there are issues you want or need to flag up, please do so in **Section 4** of the application form.

**This application form needs to be accompanied by a budget breakdown** (income and expenditure) using the template provided (see question 3, budget).

**PLEASE DO NOT SUBMIT ANY PART OF YOUR APPLICATION IN PDF FORMAT**

1. **Your contact details without this information your application may be ineligible**

The person named below will be our main contact for this project.

|  |  |
| --- | --- |
| **Your name** |  |
| **Are you applying as**…. *PLEASE USE AN ‘X’ to indicate which* | **An individual** |  |
| **An organisation** |  |
| **Job title / Role**  |  |
| **Name of organisation as listed in the Associate Directory (if applicable)** |  |
| **Mobile telephone** |  |
| **Your email address** |  |

1. **Your application**

**Please note:** your application will be assessed using the criteria [published on the website](https://wiltshiremusicconnect.org.uk/funding/development-fund/)

* 1. **Checklist without this information your application may be ineligible**

|  |  |
| --- | --- |
| Are you a Wiltshire Music Connect Associate / Associate Organisation  | YES/NO |
| Please give name/s of any Wiltshire Music Connect team members you have already spoken to about this application |  |
| In which places / areas of Wiltshire (not inc. Swindon) will your application have an impact?  |  |
| Have you read and understood the criteria? | YES/NO |
| If you are applying for between £501 and £1000, have you identified an equal amount of ‘match’ cash funding (not support in kind) from your own or other sources? We will need more details in your budget | YES/NO |
| Have you provided a budget breakdown (Income and Expenditure) using the Excel template | YES/NO |

**Be sure to submit the completed budget document at the same time and in the same email as this application form.**

**2.2 Details without this information your application may be ineligible**

|  |
| --- |
| **Does your application relate to…** (it can be as many as are genuinely appropriate) |
| Participatory music-based activity or projects for children / young people | YES/NO |
| Other (please say) |  |

|  |
| --- |
| **Does your application relate to any of our stated developmental priorities?**  |
| 1. Equity, Diversity and Inclusion
 | YES/NO |
| 1. Creative Music Making / Song writing / Composition as part of expanding musical opportunity
 | YES/NO |
| 1. Embracing the potential of Digital and Web
 | YES/NO |

|  |
| --- |
| **Name and timeline** |
| Project name/title /heading |  |
| Planned start date |  |
| Planned end date |  |

* 1. **About your proposal Answers to this question will count for up to 50% of your score**

Please consider some or all of the following: **Max 400 words please**

* Aim/s and objectives
* Why and how you know it is *needed*
* Its impact for the children & young people, organisations / schools /providers involved
* The realistic potential longevity / sustainability of the work
* How it might have a positive impact on shaping, inspiring or influencing future musical provision for young people

|  |
| --- |
| **Max 400 words please** |
|  |

* 1. **Participation numbers The appropriateness of answers to this question will count for up to 30% of your score**
* Please summarise *any* target numbers relevant to your application remembering that **our funds can only support activity benefitting 5-18 year olds in Wiltshire (directly or indirectly)**
* A condition of any grant we make will be that you **report back on how these forecasts played out in reality** - we encourage a balance of realism and ambition!

|  |  |
| --- | --- |
| Number of participatory sessions |  |
| Length of sessions |  |
| Number of events |  |
| Total no. of children / young people (aged 5-18) **directly** participating  |   |
| **How many of the above will be classed as disadvantaged?** |  |
| Age range of children and young people **directly** participating  |  |
| Total no. of children / young people (aged 5-18) **indirectly** participating (eg audience) |  |
| Age range of children and young people **indirectly** participating |  |
| Number of music leaders/ teachers/practitioners involved |  |
| Number of music leaders/ teachers/practitioners involved |  |
| Number of other providers involved |  |
| Other (please say) |  |
| Other (please say) |  |

**2.5 Reporting, reflecting and sharing Answers to this question will count for up to 10% of your score**

|  |
| --- |
| * What methods you will use to measure and demonstrate the realities of the figures you forecast above and how well you achieved the purpose and outcomes described above?
* How will you measure what went well, and why, and what didn’t go well, and why?
* How do you plan to share the result/s?

**Max 150 words please** |
|  |

**2.6 Information about any schools involved**

* If your application involves working with school/s please complete the following:

|  |  |
| --- | --- |
| Names of all schools involved |  |
| How does the project / activity contribute to the school or schools’ improvement plans or subject development plans? **Max 100 words please** |  |
| If your application is successful, all named schools will be required to complete a **School Participation Agreement** ensuring commitment to the work from school leadership – we will provide a template for successful applicants. Please confirm that you will be responsible for collecting school participation agreement/s | YES/NO |

1. **Budget Answers to this question and the clarity of your budgetary info. will count for up to 10% of your score**

Whilst we’re only asking for a summary here, we need all of your income and expenditure information on a separate document. Please provide this at the same time as this application using our Excel template.

|  |  |
| --- | --- |
| What is the total cost / value of your project / activity? | £ |
| How much of that / what amount are you requesting from this Wiltshire Music Connect fund? | £ |

1. **Safeguarding and Child Protection footnote**

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| --- |
| **As this fund is only open to Associates for Wiltshire Music Connect (who have therefore met Safeguarding criteria) no further Safeguarding or referee information is necessary** at this stage. However, if the project does not fit within your normal safeguarding arrangements and risk assessments, please tell us how you will update them here.  |
|  |

1. **Public Health requirements and guidance**

Anything we fund **must** be compliant with current Public Health requirements / guidance. You must also ensure that your work complies with requirements of any other organisations or partners you are working with as part of this agreement, including schools and venues. (Note – school requirements may vary from school to school).

**We require you to acknowledge this in the declaration below and it is included in any agreement we issue if a grant is offered.**

1. **Declaration**

I declare that the contents of this application form and accompanying information (inc. budget) are accurate and true.

In signing this application, I also acknowledge and understand Public Health requirements as outlined above and detailed in Section C of the guidance document.

|  |
| --- |
| On behalf of **applicant** |
| Name |  |
| Job Title |  |
| Signature |  |
| Date |  |

1. **Submitting your application**

Send your completed application and budget (at the same time) to info@wiltshiremusicconnect.org.uk using the **subject header** “Development Fund application *your name”*

**The closing date for applications is** [**published on the website**](https://wiltshiremusicconnect.org.uk/funding/development-fund/)

**Please note that unless you submit a full and complete application and budget together (not in separate emails) by the deadline, our team cannot assess it and it will be rejected.**

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