



Goal 2: Increase access to formal and informal education, recreation and cultural activities and resources



GOAL 2: EDUCATION

Funding Application Form

Tick category that best reflects application :

 Formal Education Informal Education Accredited Education Unaccredited Education

Name of Organisation/
Community Group :

Name of Programme/event :

Contact
Name :

Role within
Organisation

Address :

Contact :

Phone 1 :

Phone 2 :

FAX :

Email :

Proposed Start Date :

Expected Finishing Date :

Are you a profit making group Yes/No

Are you a registered charity Yes/No

Charity number if applicable

What are the aims and objectives of your Organisation : (Attach separate page if it is convenient)

Description of Programme/Event and what it is involved in terms of activities etc. :

What are the expected outcomes from the Project/Event :

Target Groups (multiple choice)

- | | |
|--|--|
| <input type="checkbox"/> Long-Term Unemployed (more than 1 year) | <input type="checkbox"/> Offenders |
| <input type="checkbox"/> Short-Term Unemployed (less than 1 year) | <input type="checkbox"/> Travellers |
| <input type="checkbox"/> Women | <input type="checkbox"/> Asylum Seekers/Refugees |
| <input type="checkbox"/> Men | <input type="checkbox"/> Homeless People |
| <input type="checkbox"/> Older People (over 55 years) | <input type="checkbox"/> Ex-Offenders |
| <input type="checkbox"/> People with Disability | <input type="checkbox"/> Substance mis-users |
| <input type="checkbox"/> Lone Parents | <input type="checkbox"/> Disadvantaged communities |
| <input type="checkbox"/> People with low incomes
(e.g. seasonal workers) | <input type="checkbox"/> Ex-Prisoner |
| <input type="checkbox"/> GLBT | |
|
 | |
| <input type="checkbox"/> Disadvantaged Young People | <input type="checkbox"/> Young Offenders |
| <input type="checkbox"/> Disabled Young People | <input type="checkbox"/> Young Substance Mis-users |
| <input type="checkbox"/> Lone Teenage Parents | <input type="checkbox"/> Young Homeless People |
| <input type="checkbox"/> Young Travellers | <input type="checkbox"/> Early School Leavers |
| <input type="checkbox"/> Young Asylum Seekers/Refugees | <input type="checkbox"/> Potential Early School Leavers/Young
people at risk of under achieving |
| <input type="checkbox"/> Parents/Guardians/Carers of young
people at risk | <input type="checkbox"/> Young people with behaviour/
learning difficulties |
|
 | |
| <input type="checkbox"/> Young Person | |

Insert Numbers involved in project			
	Males	Females	Total
Adults			
Young People			

Age Band of Children					
indicate numbers in each category					
	M	F		M	F
0 - 5 yrs			12 - 15 yrs		
5 - 8 yrs			15 - 18 yrs		
8 - 12 yrs			> 18 yrs		
Under 12 yrs			12 - 18yrs		
All age bands					

FINANCIAL SECTION

Programme/Event Running Costs

- Waterford Area Partnership Ltd. reserves the right to obtain a detailed schedule of expenditure where it feels that costing for any category is excessive.
- Matching funds - this requires details of support received from alternative sources to Waterford Area Partnership Ltd. Please indicate the amount and towards which area of expenditure. Where matching funds is non-monetary please provide details.
- Please identify all sources of matching funds sought but not yet confirmed, whether private or public sector.

Costs - Detail each item e.g. facilitation	
	€
	€
	€
	€
	€
	€
	€
	€
	€
TOTAL	€

Please outline total costs for this Programme/Event and clearly indicate below the amount you wish to apply to Waterford Area Partnership for.

What amount are you applying to Waterford Area Partnership for :

€

Please indicate if you have secured matching funding :

Source of Matching Funding	Amount	Promised/Paid
1.	€	
2.	€	
3.	€	
Total	€	

Please indicate non-monetary sources of funding :

1	
2	
3	

IMPORTANT - Please state whom cheque should be issue to :

Person cheque should be sent to :

Address :

Signed :

DATE: | | | | | | |

FOR OFFICE USE ONLY

DATE RECEIVED :

DATE CONSIDERED BY STRATEGIC COMMITTEE :

	Programme/Event costs
Amount Applied for	€
Amount Approved	€

State conditions that apply to grant (in addition to normal financial & performance monitoring conditions) :

DATE Approved by Board:

POBAL Financial Code

Goal	2	-	Action	<input type="text"/>
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Notes:

Contract

Report Due

Scoped