



Youth Action YouthBank

APPLICATION FORM

Please make sure that you read the guidance notes carefully before filling the form. Copies of the guidance notes are available from Youth Action.

The completed form should be returned to the following address either by post or in person, on or before 3pm on **18 December 2009**.

YouthBank
Youth Action
First Floor
St John's Court
Ainsworth Street
Blackburn
BB1 6AR

Decisions will be made by 21 December 2009, you will be informed within one week of the decision.

Any allocation must be spent by 27 February 2010.



PLEASE READ GUIDANCE NOTES BEFORE FILLING IN THIS FORM

Group Details

Group Name: _____

Project Leader (Young Person)

Name: _____ Date of Birth: _____ Age: _____

Address: _____

Phone Number: _____ Mobile Number: _____

E-mail Address: _____

Is the project based in the Blackburn with Darwen Area (please tick): Yes No

Group Supporter – (name of organisation who is supporting your application, if applicable)

Tell us about your project

Please give us the following information about your project. If there is not enough space in any of the boxes there is some space on the next page

Tell us ALL about your project:

e.g. Local estate, a trip to Wales; a Skate Park in your area

How will this project benefit the applicants in the long term?

How will your project benefit your community?

Who have you talked to when planning the project?

e.g. Adults, young people, other community groups

Which category or categories does your project best fit?

Your project must fit a minimum of one category. You can select more than one, if applicable.

- Support young people to be healthy (e.g. sports, healthy eating etc)
- Support young people to stay safe (e.g. community safety projects etc)
- Support young people to enjoy and achieve (e.g. Personal development / social etc)
- Support young people to make a positive contribution (e.g. training courses etc)
- Support young people to achieve economic well-being (e.g. help finding a job, CV's etc)

Details about young people INVOLVED in planning your project. (There should be at least 2 young people)

*The Government have asked us to keep a record of how many young people are involved in **planning your project**. This is different from the amount of people who will be affected by your project. This information is needed because we want to send you certificates.*

Full Name	Full Postal Address (including Post Code)	Date of Birth	Telephone

If you have more names & addresses please send on additional sheet.

Please give the number of young people for each age below:

Age	13	14	15	16	17	18	19	20 +	Total
Male									
Female									

Details of people involved in your project

Please give the number of young people for each ethnic group below:

White	Mixed	Asian	Black or Black British
British	White & Black Caribbean	Indian	Caribbean
Irish	White & Black African	Pakistani	African
Any Other	White & Asian	Bangladeshi	Any Other
	Any Other	Any Other	
Total	Total	Total	Total
Chinese	Other (Please Specify)		

Please give the number of young people for each group below:

Young disabled people:		Young parents:	
Young people with special needs:		Young refugees:	
Young offenders:		Looked after young people:	
Young carers:		Other young people:	

If you are unsure about what any of the above words mean, please call us on 01254 695847 and we will help with this.

Evaluation process

We **expect** a full report when you have finished your project, for example:

- Written report
- Photos
- Audio report
- Videos on CD/DVD
- Email report

Have a think about how you would like to do your evaluation now. If the evaluation is going to cost any money please include the cost in your budget, e.g., a disposable camera. You **will** be contacted towards the end of your project for this.

How will you do the evaluation for your project?

What will you spend the money on?

You need to list all of the things you will be buying for your project. If you are getting funding (money) from other sources/ places, include every item, even if you are not asking for us to fund them. You will need to be careful to think through everything that your project will need and include as many quotes as possible. Please ensure you are giving an accurate quote.

Item	Quantity	Cost per item	Total cost
		Total: £	

How much of this total money are you asking for from us? £

Please note that the following information: Minimum amount: £50, Maximum amount: £500

If you are getting any money from another source/ place, please write the details of where and how much money you are getting from this source:

If under exceptional circumstances the Panel would like to award more than you have applied, please write how this would benefit your project and how much more money you would need? If this is not relevant then please ignore this question and continue completing the form.

Staying Safe

How will you or your responsible adult/ worker ensure Health & Safety is carried out before the project? *(Consider Risk Assessments, Liability, Policies etc)* Your worker can help you with this question.

Reference

Please can you provide details of one person, who can provide a reference for you (this cannot be a relative/ friend). If you can we would appreciate it if you could provide the details of two people.

Referee

Name & Relationship _____

Address _____

Postcode _____

Email _____

Landline Phone _____

Mobile _____

Best time to contact _____

How long have you known this person? _____

Responsible Adult/ Worker

Please can you provide details of your Responsible Adult/ Worker.

Responsible Adult/ Worker

Check List

TO BE COMPLETED BY AT LEAST TWO APPLICANTS (Young People)

Application Checklist (please tick!)

- I have completed all sections of the form
- I have answered all the questions
- I have got prices and where possible I have attached quotes to the form
- I have signed and dated the application form
- I have attached any other information which I think will support this application

check list continued on next page...

- If successful I will be happy to attend evaluation or celebration events
- If successful, I understand that Youth Action Ltd accepts no responsibility for this project and that I understand that Youth Action Ltd has no liability whatsoever for the project, participants, young people etc

I believe that all the information in this application form is correct. If anything changes I will write to Youth Bank to let them know.

Signature of applicant 1: _____ Date: _____

Signature of applicant 2: _____ Date: _____

TO BE COMPLETED BY SUPPORTING ORGANISATION/ WORKER ONLY. (If applicable)

As the organisation supporting this proposal please confirm that the following safeguards are in place.

- The project workers and volunteers supporting this project have a current CRB Enhanced Clearance
- A risk assessment of all activities has been undertaken, or will be undertaken prior to the activity taking place
- We have Public Liability Insurance and, where appropriate Employers Liability Insurance
- All activities funded by Youth Action YouthBank will meet the Local Authority's Off-site guidelines
- We will assist the applicant to ensure that the project funding is spent and evaluation pack returned by 22/03/2010
- We have a current approved Equal Opportunities policy in place
- We have a current approved Child Protection Policy in place
- If successful, I understand that Youth Action Ltd accepts no responsibility for this project and that I understand that Youth Action Ltd has no liability whatsoever for the project, participants, young people etc

To the best of my knowledge the information in this application form is correct and as the named adult contact I confirm that all the requirements listed in the Youth Bank scheme have been met.

Signed of behalf of the supporting organisation: _____

On Behalf of (Name of Organisation): _____

Print Name: _____ Date: _____

Position Held in organisation: _____

All application forms should be returned to:

YA YouthBank
 Youth Action
 St John's Court
 Ainsworth Street
 Blackburn
 BB1 6AR

Please make sure you put on the correct postage, or you can simply drop off your application. If you have any questions about your project, or any part of this form, you can call us at Youth Action on 01254 695847 or text us on: 0777 229 4198. A member of our staff can assist you with your application. You can also e-mail your queries to: opportunities@Youth-Action.net

For Office Use Only

Date Application received:	____/____/____	Application Reference Number:	_____
Staff ID:	_____	YAYB Panel Member ID:	_____
Stage One assessment:	Yes/ No	Date: ____/____/____	Comments: _____
Stage Two assessment:	Yes/ No	Date: ____/____/____	Comments: _____
Stage Three Information Received:	Yes/ No	Date: ____/____/____	Comments: _____
Stage Four Completed:	Yes/ No	Date: ____/____/____	Comments: _____

Other comments: _____