

**Salford Foundation Trust**

Application Pack

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**Registered in England and Wales no: 5138092 Registered Charity no: 1105303**



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# Introduction – What is the Trust?

The Salford Foundation Trust is a charity that helps children and young people to develop their hobbies, interests, skills and talents by providing funding that would otherwise be unavailable from any other source.

**Where does the Trust get its funding from?**

The Trust is a registered charity (Reg No: 1105303) and relies on donations from local businesses, other related charities and fundraising activities.

**Does all the money raised for the Trust go to children and young people in Salford?**

Yes 100% of monies raised goes directly to opportunities. The administration costs of the Trust are provided by the support of Salford Foundation, a social inclusion charity.

# Can I apply?

### Who can apply?

You are eligible to apply if you:

* Are aged between 5 – 25 years old.
* Have been a resident in the City of Salford for more than three years.
* Are unable to fund the opportunity through another source.

Agencies and practitioners working with you (for example your teacher, youth worker, mentor, parent or legal guardian) can apply on your behalf.

Please note priority will be given to applicants under 21.

# What can I apply for?

The Trust has five categories: (A) General, (B) Performing Arts, (C) Sport, (D) Vocational and (E) Skills and Talent for Self Employment.

The Trust will consider requests to fund opportunities that will enable a child or young person to learn and/or develop new skills or take part in a character building experience or activity.

This could be funding for, example:

|  |  |  |
| --- | --- | --- |
| * **a piece of equipment** | * **an activity** | * **a training course** |

We are keen to hear about the impact the opportunity will have on the applicant and what they hope to achieve from it.

### Apprenticeship kits

If you are applying for apprenticeship equipment, please note the Trust will only consider applications from those who are solely responsible for dependents, young carers or young people who live on their own. Please note we will require you to provide official evidence that you fit this criteria.

### How much can I apply for?

The Trust accepts applications up to the value of £500. In exceptional circumstances we may consider requests for a higher amount. If your application is successful we will pay for your request, rather than release actual monies, i.e. payment will be made directly to the provider of the service or equipment needed for your opportunity. Where appropriate this will be paid in installments.

### Exclusions – What can’t I apply for?

The Salford Foundation Trust will not consider requests for the following;

* Childcare costs
* Course fees for school, college, university and associated general living expenses
* Driving lessons and associated items e.g. insurance and licences
* Living expenses
* Membership fees
* Remedial intervention, i.e. therapies (speech/language/occupational etc)
* Retrospective funding (something that has already happened)
* Standard school/college/sporting group trips

The Salford Foundation Trust will not consider opportunities that: -

* Have a political or religious focus
* Should be financed by statutory services
* Are for the benefit of a group of people e.g. a school, youth club etc.

Residential excursions under normal circumstances will not be considered, however, in cases that are unique to the individual the Trustees will consider how/if they can support the application.

This is not an exhaustive list.

The eligibility criteria policy will be reviewed on a quarterly basis.

**The Trustees decision is final and no further discussion or correspondence** **will be entered into once the decision has been made.**

# Guidance Notes

## When can I apply? There are three funding rounds this year. Here are the deadlines for 2019:

|  |  |  |
| --- | --- | --- |
| **Round** | **Applications Open** | **Application Deadlines** |
| 1 | Monday 11th March | Friday 12th April |
| 2 | Monday 24th June | Friday 26th July |
| 3 | Monday 30th September | Friday 1st November |

### Can I get help filling in the application form?

Yes. One of your Referees can help you to complete the form, for example your teacher, mentor, or parent/carer. They will be known as your Representative and will need to sign the form in the section provided or if you prefer they can complete the form in full on your behalf. However, if your Representative would be a direct beneficiary i.e. they would be paid to provide the service or opportunity if you are successful they must not fill the form in. You can also get support by contacting the Trust’s Charity Administrator and a member of staff will be made available to help you complete the application form.

###### Application - Alternative method

If you have difficulty completing application forms, we will accept an alternative method of application. This can be an acoustic or visual recording whereby you speak your answers to the questions on the application form instead.

Additional information

If you would like to send us examples to help us understand your application better to demonstrate the talent you wish to develop please do so. Should you wish to attend a filmmaking workshop or take up drama lessons you could submit a short film to demonstrate your potential, or if you are applying for art materials you may wish to submit a painting.

##### Who decides?

If your application meets with the criteria of The Salford Foundation Trust, it will go to the Trust’s Sub-Committee to be assessed. However, before they make a decision they may require further information from you or your Referee. This will provide an opportunity for us to discuss your application in further detail.

## When will I find out if my application has been successful?

**What happens if my request for funding is approved?**

When you are notified that your application has been successful, arrangements will be made to fund your request. To help us monitor and evaluate The Salford Foundation Trust, we will contact you and your opportunity provider after your opportunity has begun to find out how you have benefited. We will be interested to hear about your progress and what impact you feel our funding has had. This will help us to make sure that we too have achieved what we set out to do.

If we do not receive any correspondence from either you or the provider of the opportunity within three months of our offer, we will assume that the funding is no longer required and it will therefore be withdrawn.

**What happens if I am unsuccessful?**

There is only limited funding available and the decision of the Sub-Committee will be final. If your application is unsuccessful we will be unable to enter into feedback discussions. We will inform you of the outcome at the earliest opportunity and if unsuccessful we will do our best to signpost you to alternative sources of support or funding.

##### Can I re-apply?

If you are unsuccessful you may re-apply for something else but not the same opportunity. For successful applicants in exceptional circumstances further funding may be considered.

# Important Information

* If you would like to request a printed copy of this form, or if you are unsure if your application

will be eligible please contact the Trust’s Charity Administrator on 0161 787 3834.

* Please keep a copy of your completed Application Form.
* If there is not enough space to write your answer, please use the additional sheet at page 16.
* Incomplete forms will be returned and we will ask you to supply the missing information.

Please note this will delay a decision.

* When posting your application please use a large 1st Class stamp or equivalent.
* Please return your application form in good time to enable follow ups. Applications received

after the deadline will not be processed.

In the About you and your family section of the application the background information you provide will help us to understand more about you and the support you need.

If you are under the age of 18 your parent/carer or representative can complete the form on your behalf. The child or young person you are applying for will be referred to as the Applicant for the purpose of this form.

If you need support to complete the application form, please contact 0161 787 3834 or [mail@salfordfoundationtrust.org.uk](mailto:mail@salfordfoundationtrust.org.uk)

# General Data Protection Regulation (GDPR)

By completing this application for consideration you are agreeing that The Salford Foundation Trust can retain your information for up to three years. For applicants and their families this will allow us an opportunity to refer to information should your family reapply to The Trust during this period of time.

Please note that as Representatives and Referees you are agreeing that The Salford Foundation Trust can retain your information for up to three years and that we can contact you if we need your assistance, should we have any questions about this or future applications from the beneficiary.

# About you and your family

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name of Person Completing the Form: | | | | | | | | |
| Are you a Representative  Applicant | | | | | | | | |
| First Name(s) of Applicant |  | Surname of Applicant | | | | |  | |
| House No. |  | | | | | | | |
| Street |  | | | | | | | |
| Town |  | | | | | | | |
| City |  | | Postcode | |  | | | |
| Email address\*(Representative’s email address if Applicant is under 18)  *\*Please ensure this is an email address you check regularly because we may need to contact you.* | | | | | | | | |
| Telephone No’s | Home |  | | | | | | |
| Mobile (Representative’s mobile number if Applicant is under 18) | |  | | | | | | |
| Applicant’s  date of Birth |  | | | | Applicant’s Age |  | | |
| Applicant’s Gender | Male | | | | Female | | | |
| If the Applicant is over 16 do you undertake any paid employment or voluntary work? | | | | | | | | |
| How many people are there in your household? | |  | | | | | | |
| No of adults (parents/carers): | | No of children (under 18): | | | | | | |
| No of siblings over 18? | | Other residents: | | | | | | |
| Ages of children in household?  (please list): | | | | | | | | |
| Employment status - If you are employed, please take this opportunity to tell us what you do?  If there is more than one parent/carer responsible for the Applicant, please include details for both:  **Parent/Carer 1**  Name………………………………………… Relationship to applicant………………………………….  Employed full time  Part time  Student  Other please specify ……………………………...  Job Title…………………………………………Employer…………………………………………………  **Parent/Carer 2**  Name……………………………………… Relationship to applicant……………………………………  Employed full time  Part time  Student  Other please specify ……………………………..  Job Title…………………………………………Employer………………………………………………… | | | | | | | | |
| How did you hear about the Trust? | | | | | | | | |
| Have you previously made an application to the Trust? | | | | Yes | | | | No |
| If Yes, please give details: | | | | | | | | |
| How many years has the applicant been a resident of Salford? | | | | | | | | |

# Making the best of your application

Help us to understand the reason(s) for your application to the Trust. You need to be clear about

the things that are limiting your funds. Please tick **Yes** or **No** if any of the examples below apply to you. This is for information only but it is helpful for us to know as much as we can:

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| Is a member of your family receiving Carers Allowance? |  |  |
| Are you a Young Carer? |  |  |
| Would you describe yourselves as a low income family? |  |  |
| Are you a care leaver or living independently of your family? |  |  |
| Are you in care? |  |  |
| Do you receive support via the CSA (Child Support Agency)? |  |  |
| Are you in receipt of any nationally recognised benefits such as Universal Credit or tax credits? |  |  |
| Are you a lone parent family? |  |  |
| Has there been a recent change in employment status which affects your current opportunities? |  |  |

You will be given the opportunity to expand on the above information or add any circumstances

which you feel are relevant in Question 7 on page 10 or on the Additional sheet at Page 16.

# What are you applying for?

|  |  |
| --- | --- |
| 1. What is the opportunity that you require funding for?   *Describe the opportunity in as much detail as possible. The opportunity could be an item of equipment, activity or training course.* | |
| 1. When will the opportunity start and for how long?   *Please tell us when the opportunity will start and finish. If it won’t start for a while, tell us why.*  ***e.g. January 2018 – January 2019*** | |
| 1. **Where will the opportunity take place?**   *If this opportunity is undertaken with a group, what is the name of the group?*  *Please also indicate where the group meets and the location.*  **Venue/location** | |
| 1. **Why do you want this opportunity (for which you are seeking funding)?** | |
| 1. *What attracted you to this opportunity in particular?* | |
| 1. *Have you tried this before and if so, why do you want to do it again?* | |
| 1. *We would be interested to hear about any past achievements or experiences you may have had that demonstrate commitment to this opportunity* | |
| 1. *Please also tell us also about your aims for the future and how this opportunity will help you in what you want to achieve?* | |
| 1. **Do you currently hold any relevant certificates, accreditations or qualifications related to this opportunity that you are applying for?** | |
| **Awarding Body** *e.g. ABRSM – The Associated Board of the Royal Schools of Music* | **Awards and certificates received or working towards** *e.g. Grade 1 piano* |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 1. **What will you gain from this opportunity?** *What difference will the opportunity make to you – will it allow you to develop a skill or fulfill an ambition? What experience will you gain?* | |
|  | |
| 1. Please explain why you cannot fund this opportunity yourself.   Note: this question is to be answered by your parent, guardian or carer if you are under 18. *Include here details of any circumstances standing in your or the applicant’s way of undertaking the opportunity for which they are seeking funding.* | |
|  | |
| 1. How will your Referees support you throughout this opportunity?   *For example, will you receive regular feedback from your Referees/provider during the course of this opportunity?* Yes  No  Please give details: | |

# Funding and Cost breakdown

|  |
| --- |
| 1. **How much are you requesting from The Salford Foundation Trust?**   \* The maximum amount is £500 but we may in exceptional circumstances consider requests for a higher amount. |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Please provide a breakdown of each item or activity you are requesting from The Trust. Using the example below and complete in the empty sections.** | | | | | | | | | |
| **Provider**  *e.g. John Smith (Tutor)* | **Supplier**  MAPAS | | **Opportunity/item**  Music Lessons | | **Cost**  *10 lessons @ £20 each = £200* | | | **Contact Details**  *Tel: 0161 123 4567* | |
|  |  | |  | |  | | |  | |
|  |  | |  | |  | | |  | |
|  |  | |  | |  | | |  | |
|  |  | |  | |  | | |  | |
|  |  | |  | |  | | |  | |
| 1. **Other Funding Secured or applied for?**   *If you have applied for or receive funding from other Trusts, funding bodies, parent(s) or carers please list them below. Please include travel, accommodation, clothing, subscriptions or membership.* | | | | | | | | | |
| **Organisation/Provider**  *e.g. British Taekwondo Federation (BTF)* | | **Supplier**  *www.britishtaekwondo.org.uk* | | **Opportunity/item**  *BTF Global Athlete Licences (GAL) & Global Officials Licence (GOL)* | | **Cost**  *£30.00* | **Contact Details**  [*clare.smith@britishtaekwondo.org*](mailto:clare.smith@britishtaekwondo.org)  *0161 123 4567* | | **Pending decision – date of result**  *Pending 20/06/2018* |
|  | |  | |  | |  |  | |  |
|  | |  | |  | |  |  | |  |
|  | |  | |  | |  |  | |  |
| 1. **What does the full total value of the opportunity cost?**   **£** | | | | | | | | | |

# Declarations

## Applicant or Representative

* I confirm that the details I have provided in this application are true and correct to the best of my knowledge and belief (If completed by the Representative I am not a direct financial beneficiary of opportunity).
* The purpose for funding described in this application is a valid and genuine request.
* I agree to being contacted by The Salford Foundation Trust after the opportunity has begun to find out how I am benefitting/ the applicant has benefited.
* I confirm that the details I have provided in this application are true and correct to the best of my belief.

|  |  |
| --- | --- |
| Signature of applicant or Representative: |  |
| Print name: |  |
| Date: |  |
| Relationship to applicant if completed by a Representative: |  |
| Telephone no: |  |
| Email: |  |
| Address (including postcode): |  |
| Please tick this box if you or the Applicant are willing to be involved in any publicity should the application be approved. | |

# Referees

To help us make responsible decisions we will need you to provide the names of two individuals (not relatives or friends) who have a professional relationship with you and who are willing to act as Referees for your application. One of these people may also be your Representative (the person who completes the form on your behalf). **The Representative cannot be someone who will directly benefit from your opportunity i.e. the owner of a business where your opportunity will take place.**

We would ask that your Referees and Representatives are willing to support your application and help you to make the most of the opportunity that you are seeking funding for. They too will need to sign the application form. In exceptional circumstances we will accept one Referee. Your Referees will need to be willing to help you source the information required for your application, such as where and when your desired opportunity will take place, how much it will cost and how long it will last. It is important that you and your Referees are satisfied with the suitability and quality of the opportunity and the credibility of anyone associated with it.

## Referees (one Referee may also be your Representative)

* The purpose for funding described in this application is a valid and genuine request.
* Should this application be successful, I accept responsibility for supporting the applicant through this opportunity.
* I agree to being contacted by The Salford Foundation Trust after the opportunity has begun to find out how it has benefited the applicant.

**Referee details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Referee 1** | | | | |
| First Name(s) |  | | Surname |  |
| House No. |  | | | |
| Street |  | | | |
| Town |  | | | |
| City |  | | Postcode |  |
| Email address |  | | | |
| Telephone |  | | | |
| How do you know this person?\* | | *\*Referees must not be friends or relatives* | | |
| Signature of Referee 1: | |  | | |
| Print name: | |  | | |
| Date: | |  | | |
| Please tick this box if you are willing to be involved in any publicity should the application be approved. | | | | |
| **Referee 2** | | | | |
| First Name(s) |  | | Surname |  |
| House No. |  | | | |
| Street |  | | | |
| Town |  | | | |
| City |  | | Postcode |  |
| Email address |  | | | |
| Telephone |  | | | |
| How do you know this person?\* | | *\*Referees must not be friends or relatives* | | |
| Signature of Referee 2: | |  | | |
| Print name: | |  | | |
| Date: | |  | | |
| Please tick this box if you are willing to be involved in any publicity should the application be approved. | | | | |

# Additional sheet

##### Please use this additional page for any supporting information that you would like to tell us.

# Feedback

Please give us your feedback – good or bad –and whether you think our application can be improved in anyway.

|  |
| --- |
| Can I Apply? – Is there anything we’ve missed?  Yes  No |
| Guidance Notes – Have we provided enough supporting information for you to complete the application form?  Yes  No |
| About You – Did you have enough opportunities to tell us about you?  Yes  No |
| Website – Have you visited our website and if so what did you think?  Yes  No |
| Did you receive enough support from The Trust during the application process can we do better?  Yes  No |
| Other than what The Trust already offers, is there anything else you would consider applying for if funding were available?  Yes  No |
| Would you recommend the Trust to a friend?  Yes  No |
| Would you consider fundraising for the Trust?  Yes  No |

# Equal Opportunities

The Salford Foundation Trust strives to be an equal opportunity and social inclusion organisation. In order to ensure this, we will need to monitor the sex and ethnic origins of our applicants and we ask for your cooperation in providing the following information: (please tick the appropriate box).

If you do not wish to complete this form you are not obliged to do so.

**SEX:**  MALE  FEMALE

**ETHNICITY:**

WHITE  BLACK-CARIBBEAN  BLACK-AFRICAN

BLACK-OTHER  Please specify: ……………………………………………

INDIAN  PAKISTANI  BANGLADESHI

CHINESE

OTHER  Please specify:………………………………………………

**NATIONALITY:**

# Application Checklist

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| Have both Referees signed and dated the application form? |  |  |
| Are your Referees people who you have a professional relationship with i.e. not a friend or relative? |  |  |
| Have you provided a contact telephone number and email address in case the Charity Administrator needs to get in touch with you? |  |  |
| Have you described clearly what it is that you require funding for? |  |  |
| Have you answered all the questions on the form? |  |  |
| Have you given a full explanation as to why you cannot fund this opportunity yourself? |  |  |
| Have you given an accurate breakdown of costs for the opportunity you are applying for i.e. number of hours and total cost of the opportunity? |  |  |
| If you are applying for equipment, have you included the full details of the item(s) including model number(s) type and size? |  |  |

Please note, if you have answered NO to any of the questions in the table above, your application will NOT be valid and will be returned for completion, please address any outstanding information before submitting your application.

**Please return completed application forms to:**

The Salford Foundation Trust

Foundation House

3 Jo Street

Salford

M5 4BD

If you would like to join our marketing list

contact[**mail@salfordfoundationtrust.org.uk**](mailto:mail@salfordfoundationtrust.org.uk)

Our website address is salfordfoundationtrust.org.uk

For any other queries, please contact or visit:



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