**Grants Programme 2018/2019 Application Form**

|  |
| --- |
| **Title of Proposal:** |
|  |
| **Amount of Grant: (£20,000-£100,000)** |
|  |

|  |
| --- |
| 1. **Lead Applicant Details:**
 |
| Name | First Name | Last Name |
| Post held |  |
| Organisation |  |
| Company Registration Number/Charity Registration Number/DfE/Other |  |
| Summary of organisation aims and objectives  |  |
| Address |  |
| Postcode |  |
| Telephone  |  |
| Email |  |
| Data Protection Officer (DPO) details (if applicable for your organisation) |  |

|  |
| --- |
| 1. **Other Applicants:**
 |
| Name | First Name | Last Name |
| Post held |  |
| Organisation |  |
| Company Registration Number/Charity Registration Number/DfE/Other |  |
| Summary of organisation aims and objectives  |  |
| Address |  |
| Postcode |  |
| Telephone  |  |
| Email |  |
|  |  |
| Name | First Name | Last Name |
| Post held |  |
| Organisation |  |
| Company Registration Number/Charity Registration Number/DfE/Other |  |
| Summary of organisation aims and objectives |  |
| Address |  |
| Postcode |  |
| Telephone  |  |
| Email |  |

|  |
| --- |
| 1. **Proposal Summary (maximum 500 words)**
 |
|  |

|  |
| --- |
| 1. **Proposal Timescale**
 |
| Start date |  |
| End date |  |
| If more than 12 months provide reasons |  |

|  |
| --- |
| 1. **Key deliverables and anticipated outputs**
 |
|  |

|  |
| --- |
| 1. **Proposed benefits of project**
 |
|  |

|  |
| --- |
| 1. **Methodology**
 |
|  |

|  |
| --- |
| 1. **Project Milestones**
 |
|   |

|  |
| --- |
| 1. **Public Benefit**
 |
| Set out how your project will show a commitment to activities for public benefit and show you have appropriate resources and skills to achieve this.  |  |

|  |
| --- |
| 1. **Experience**
 |
| Set out your experience in delivering projects with public benefit outcomes and the steps you have taken to ensure research results are made available to the public.  |  |
| 1. **Financial Safeguards**
 |
| Please explain the processes you have in place to ensure funds are used for purposes set out in this application. |  |

|  |
| --- |
| 1. **Funding**
 |
| Have you received or applied for funding from any other organisation for this proposal? | YES/NO\* (delete as appropriate – if YES, please attach a copy of your award letter) |
| Name of funding organisation |  |
| Reference number |  |
| Amount of funding received or applied for |  |
| Duration of funding |  |

|  |
| --- |
| 1. **Lead Applicant Bank Details**
 |
| Account name |  |
| Account Number |  |
| Sort Code |  |
| Name and Address of Bank |  |

|  |
| --- |
| 1. **Eligibility**
 |
|  | Lead Applicant | Other Applicants |
| Are you currently or have you ever been an employee or committee member of the ICO? |  |  |
| Are you disqualified as a director (Company Directors Act 1986)? |  |  |
| Are you the subject of insolvency or bankruptcy proceedings (including voluntary arrangements with creditors)? |  |  |
| Does your organisation have a safeguarding policy in place? (Required if your proposal involves vulnerable adults or children) |  |  |
| Does your organisation have a diversity and equal opportunities policy in place? |  |  |

|  |
| --- |
| 1. **Documents Attached**
 |
| Expenses Schedule | YES/NO |
| Copies of Award Letters | YES/NO |
| Constitution/Memorandum and Articles/Other Governance Documents | YES/NO |
| Company Accounts  | YES/NO |
| Organisational Privacy Policy | YES/NO |

|  |
| --- |
| 1. **How did you hear about the Grants Programme?**
 |
|  |

|  |
| --- |
| 1. **Declaration**
 |
| I certify that the information I have provided on this application form is correct. I understand that should information be found to be false, the ICO reserves the right to withdraw funding and to recover any funds paid under the Grants Programme. |
| Signed | Dated |
| **For Office Use Only** |
| Date Application Received |  |
| GGIS Scheme Reference Number  | SCH-000003587 |
| GGIS Case Reference Number |  |
| Eligible | YES/NO |
| **1st Review** |
| Date |  |
| Outcome  |  |
| **2nd Review** |
| Date |  |
| Outcome  |  |
| **Commissioner** |
| Signature |  |
| Date |  |