Delivering Differently Pilot Fund One-Off Grants 2018 APPLICATION FORM



Section 1

Organisation / group				
Contact person and contact details				
Project name				
Please describe what you wish to have funded (approx. 250 words)				
What do you anticipate this project will achieve in improving the journey to employment for people with mental health problems? Please give both qualitative and quantitative indicators of change. (approx. 150 words)				

How has the need for your initiative been identified? (approx. 150 words)			
In which locality(ie	es) do you intend to be operating?		
North East Fife			
Glenrothes			
Kirkcaldy			
Levenmouth			
Dunfermline			
South West Fife			
Cowdenbeath			
Fife-wide			
	v people with lived experience of mental health problems and er organisations will be involved in your initiative. (approx. 150		

How will you measure the impact of the work? Please describe both quantitative and qualitative approaches to assessment. (approx. 150 words)		
Please explain how this initiative is new / different to what you currently provide. (approx. 150 words)		
(upprox. 100 words)		
How do you intent to embed the learning from your DD Pilot provision in existing		
or new service provision? (approx. 150 words)		
When will your project start and finish? (projects must be complete by Feb 2019)		
Trich win your project start and mish: (projects must be complete by 1 eb 2019)		

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Section 2

Organisation / group	
Contact name and details	
Project name	

Please provide a breakdown of how the grant would be used

These headings are intended to help you structure your budget. Please feel free to delete or add lines and appropriate headings as required.

STAFF/VOLUNTEER COSTS (travel, training, sessional work costs etc.) Staff Volunteer Expenses £ PROPERTY/VENUE COSTS (rent, hire, insurance, etc) £ SUPPLIES & SERVICES (resources, equipment, publicity, hospitality etc) £ OTHER COSTS PLEASE SPECIFY (events, community engagement, research and evaluation) £ £	
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TOTAL £	
Project lead Signature	