**Creative Minds Project Application Form**

**Please see document “Creative Minds Project Application - Guidance 2022 - kirklees and calderdale” *before* completing this form**

**Please keep your answers as concise and succinct as possible. Applications are read by a multitude of people and services but they don’t always have a lot of time. You can provide supplementary information if you wish but please keep this application concise.**

**If you need any further help or advice please contact the Creative Minds Team for your area below:**

**Kirklees & Calderdale** Alex Feather Mob 07827 232698 Email: alex.feather1@swyt.nhs.uk

|  |
| --- |
| **Project Locality:** (please highlight): Calderdale Kirklees  |
| **Lead Name & Contact details; including email and phone number:** |
| **Organisation Name:**  |
| **Project Name:**  |
| **Proposed start and completion dates:** |
| **Project Proposal/description** |
| **Key Objectives & Benefits of your proposal:** Please indicate which services/organisations/ groups will benefit and whether you have had prior conversations with them about your proposal. Bullet points please. |
| **Project Budget (to include:** creative worker/volunteer spend, admin, overheads, marketing, evaluation), Bullet points please: |
| **Number of planned sessions, session length (time), events.** Bullet points please |
| **How many people will benefit? (directly/indirectly)** |

|  |  |
| --- | --- |
| **SOURCE OF FUNDING** | **AMOUNT** |
| Requested from Creative Minds |  |
| **Match Funding**  |  |
| cash 1 – source of funding |  |
| in-kind 2 – source of funding |  |
| **TOTAL INCOME** |  |

Please send completed form to alex.feather1@swyt.nhs.uk and cc creativeminds@swyt.nhs.uk. We can accept postal versions by arrangement.