# Ovingdean logo-P2748-jpeg***Ovingdean Hall Foundation***

# Ovingdean Hall Foundation, previously Ovingdean Hall School for Deaf Children, is a charity and grant-maker supporting education projects for deaf children and young people in the UK.

**Grant Application: please state the name of the project and the amount you are seeking:**

**Section One – Your Organisation**

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| Name of Organisation: |
| Address |
| Post Code: |
| Web address: |
| Contact name: | Job Title: |
| Telephone number: | E Mail: |
| Do you have any communication needs? |
| Charity Number: | Date Constituted: |
| Company Number: | Date Registered: |
| Other status or description of your organisation: |
| Summary of last annual accounts for year-end date: |
| Income: **£** | Expenditure: **£** | Net current assets and investments:**£** |
| Total number of people in your organisation  |
| Staff (full time equivalent): | Volunteers: |
| Please provide a brief historical summary about your organisation: |
| Briefly describe the range of services or support your organisation currently provides and approximately how many people benefit from these: |
| Explain the needs and characteristics of the young people and children you aim to help? |
| In which areas of the UK do you operate? (does this provide any additional challenges to your organisation?) |

**Section Two – Your Funding Request**

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| What type of Grant are you applying for? |
| Revenue Project |  | Operational Support |  | Training or Research |  |
| When do you need the funding to start? |
| What are you seeking funding for? |
| How do you know this work is needed? |
| What are the activities, services and output you are planning to provide? |
| Is this a new project based on other work, the continuation of existing work or the further development of a piece of work already piloted? |
| What outcomes (practical results, changes and/or improvements in the lives of the young people and children you help) do you hope to achieve with this funding? |
| How will you monitor and evaluate the work you are planning to deliver with this funding? |
| How will you know your objectives have been successfully achieved? |
| Is there anything else you wish to tell our Trustees about your application? |

**Section Three – Financial information about your funding request**

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| Total requested |
| Annual Amount | Year 1 | Year 2 | Year 3 |
| Confirm the total budget of the work you are asking us to contribute to: |
| How much have you already secured toward this budget? |
| How are you planning on funding the work?* Is your organisation committing any of its own resources?
* Do you have targets for various funding sources e.g. individual giving, Trusts, companies etc.?
* What funds are already in place and where from (e.g. specific Trust, local council etc.)
* What other pending or planned applications do you have in place?
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| Please provide breakdown of costs & attach a project or organisational budget:  |

|  |  |  |
| --- | --- | --- |
| Please confirm your organisation has an appropriate safeguarding policy | Yes  | No |
| Please confirm that Disclosure and Barring Checks are carried out on all staff and volunteers working with vulnerable young people | Yes  | No |
| Referees: please note, the Trustees may ask you for the contact details of two independent referees during this application so please be prepared to provide details if required. |

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| **This form was completed by (print name):** **I confirm the above statements are true and that all the information provided in this application is correct.** **Signed:**  **Date:** **Position in organisation**:  |