

MOSELEY IN BLOOM SCHOOLS PROJECT APPLICATION FORM

Name of school	
School address including postcode	
First contact name	
E-mail address	
Phone number(s)	
Second contact name	
E-mail address	
Phone number(s)	
Name of your project	
Start date	
End date	



PROJECT PROPOSAL

Please describe your project in up to 300 words. What is your general plan? Is this a new initiative, or a phase in an ongoing project? How will it involve your students, teachers and parents? What year groups will be included? How will the school benefit overall?



ITEMISED BREAKDOWN OF COSTS

Description Estimated cost [</t

FUNDING SOURCES

How much would you like to apply for from Moseley In Bloom?

6		
£		
-		

If your project requires additional funding above £500 please give details below to show how you will secure these funds:



PROJECT PLAN

Please outline how your project will progress giving the activities and outcomes for appropriate time periods. If the project is for a full academic year you can divide this into half-terms. For shorter projects you may wish to plan it by month.

wnen	Activities and outcomes in this period

When Activities and outcomes in this period



CONDITIONS AND DECLARATION:

- We hereby certify that the information contained in this form is accurate to the best of our knowledge.
- We understand and accept that giving deliberate false information could result in the withdrawal of any award made.
- The award will be used only for purposes for which it is granted.
- Any unspent monies awarded by Moseley in Bloom will be returned.
- Failure to comply with these conditions may result in the recovery of funds awarded.
- The decision of the Moseley in Bloom panel is final.

l agree to the above conditions	Tick	Contact name one
l agree to the above conditions	Tick	Contact name two
Date submitted		

Please send your application to <u>schools@moseleyinbloom.org.uk</u>

Approved by MiB Panel	
Date	

