

STUDENT PROJECTS GRANT SCHEME

Application form

(Please refer to the Application guidelines before completing this form)

Applicant details

Name of applicant student group	
Type of organisation	<input type="checkbox"/> Department <input type="checkbox"/> Faculty <input type="checkbox"/> School <input type="checkbox"/> Kent Union <input type="checkbox"/> Other _____
<input type="checkbox"/> I confirm that this application has been approved by the group outlined above.	

Main contact details

Name	
Job title	
Email	
Phone	

Project details

Project title	
Type of project	<input type="checkbox"/> A new project/activity <input type="checkbox"/> An existing project/activity
Project start date	
Project completion date	

Please give a summary of the project **in a maximum of 250 words** to describe its purpose, activities, timeline and proposed outcomes

Please describe the current need for the project and who the key beneficiaries will be

Please explain how the project meets the criteria for support from the Student Projects Grant Scheme

You are welcome to send us a 3-minute video about your project, introducing us to your team, your vision and passion and any other information you think might be useful for us to understand your project better. Please note this is optional and you will not be penalised should you choose not to send any video.

Please give the YouTube/Vimeo or url here: _____

Project budget

Amount requested from the Student Projects Grant Scheme	£
Total cost of the project	£
Please include a budget plan with breakdown of costs under separate headings (e.g. volunteer expenses, travel costs, activity costs)	
What other sources of funds have been approached?	
How much, if any, has been secured?	£
Will the project still go ahead if under-funded, and in what form?	
Do you require recurrent or future funding to sustain the project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'Yes', how do you plan to seek additional funding?	

Project publicity/acknowledgment

If your application is successful, will you be willing to take part in publicity activities, to support the Kent Opportunity Fund, particularly involving Kent alumni?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please list the different channels through which you will be able to acknowledge the support of the Kent Opportunity Fund (e.g. thank you message in a publication)	

Declaration

It is essential that you understand and agree to sign up to the following statements. Please note that if you leave your post or can no longer fulfil your responsibilities, or someone else takes over responsibility for the grant, you must inform the Development Office immediately.

- We certify that the information contained in this application is correct and that we are authorised by the group/department to accept these conditions on their behalf.
- We will only spend the grant for the purposes outlined in this initial application unless we have received written confirmation from the Development Office that we can make a variation of spend.
- We accept that the Development Office will, under no circumstances, be liable for any damage, injury or loss of any kind whatsoever to any property or persons occurring as a result of activities undertaken with this grant.
- We will ensure that all necessary permits, licenses and approvals have been obtained for any event or project funded by the grant and that the event or project complies with all relevant regulations.
- We realise we must keep all financial records and accounts including receipts for items bought with the grant for at least six years. These must be made available to the Development Office if requested.
- We give permission for the Development Office to record the information in this form electronically and to contact our organisation by phone, mail or email with regards to this application.

This form should be signed by two people from the group/department's management or organising committee. We suggest you keep a copy for your own records.

Signatory 1

Name	
Job title	
Date	
Signature	

Signatory 2

Name	
Job title	
Date	
Signature	

PLEASE RETURN BY Monday 17th January 2020 at 5:00pm to A.R.Perkins@kent.ac.uk or send to: Alex Perkins, Alumni Stewardship Officer, Room G17, Rutherford Annexe, Development Office, University of Kent, Canterbury, Kent, CT2 7NX, UK