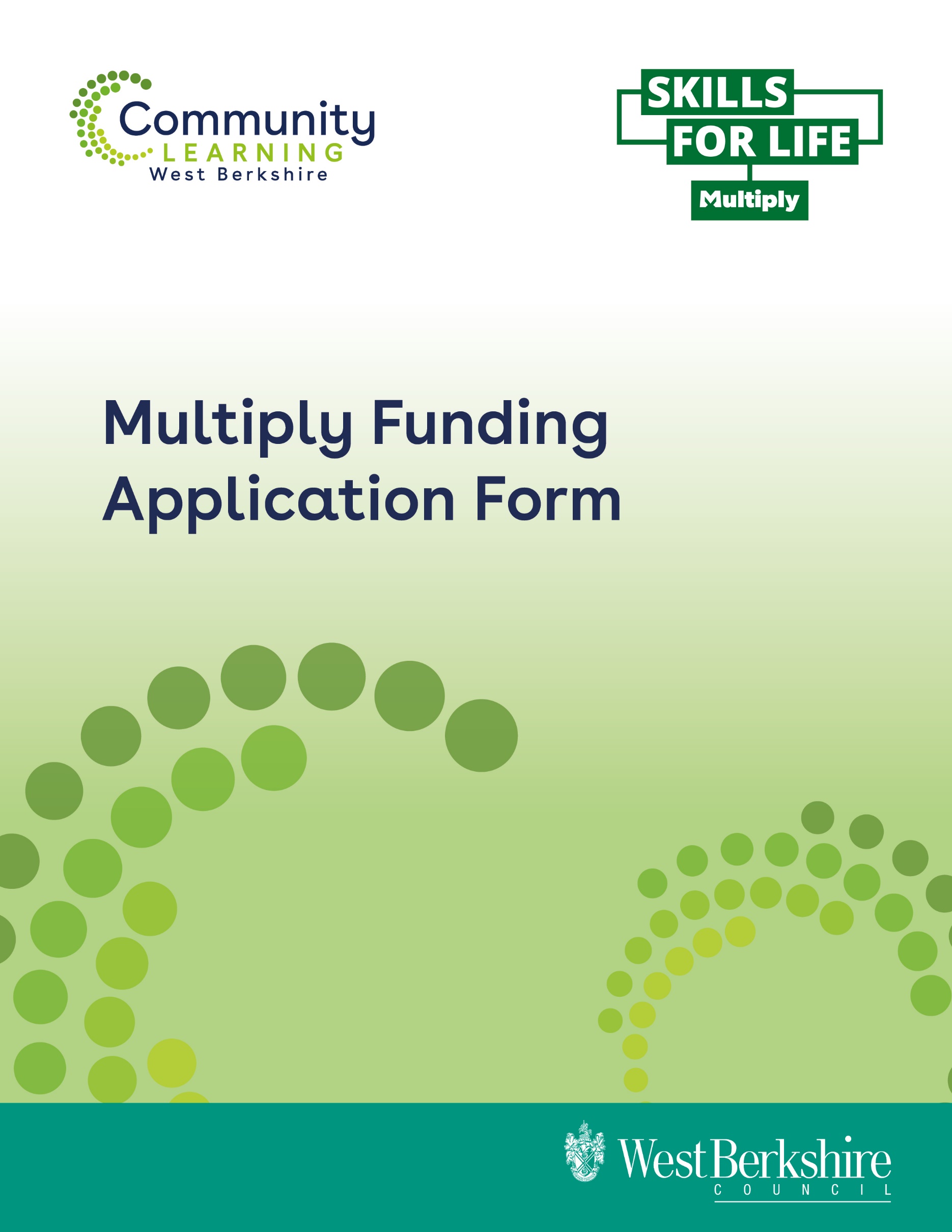
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**West Berkshire Council Multiply Fund**

* ***Please read the guidance notes to help you complete this form.***
* ***Complete sections A, B and C.***
* ***Section A is scored, Section B contains due diligence information and is not scored, Section C is for signature.***
* ***Submit your bid by email to*** [***aclteam@westberks.gov.uk***](mailto:aclteam@westberks.gov.uk)

|  |  |  |  |
| --- | --- | --- | --- |
| **Organisation:** |  | | |
| **Address:** |  | | |
| **Postcode:** |  |  | |
| **Contact Name:** |  | **Telephone:** |  |
| **Email:** |  |

|  |
| --- |
| **Name of Programme/Course/Activity** |
|  |

|  |  |  |
| --- | --- | --- |
| **Funding Requested (typical annual funding is around £25,000 per organisation)** | | |
| April 2022 to March 2023 | £ |  |
| April 2023 to March 2024 | £ |
| April 2024 to March 2025 | £ |
| Total Funding Requested | £ |  |

**SECTION A – Questions 1-6 are scored**

|  |  |
| --- | --- |
| **1. Programme Aims** | |
|  | |
| **2. Target Audience**  *Provide a description of which learner groups this programme will be targeting (Eg unemployed, employed, low skilled, over 50s, with learning needs, location etc). See pages 2-3 of guidance document.* | |
|  | |
| **3. Programme Description** | |
|  | |
| **4. Planned Programme Outcomes (success and progression)** | |
|  | |
| **5. Identifying local need and working in partnership** | |
| **5a) Describe how you have identified the need for your programme/course** | |
|  | |
| **5b) Describe how you will work with other organisations to reach your target groups and deliver your programme** | |
|  | |
| **Name of Partner** | **Role in project** |
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|  | | | | | | | | | | | | |
| **6. Delivery Plan***(Complete the delivery plan below)* | | | | | | | | | | | | |
| **6a) Non-accredited Provision** | | | | | | | | | | | | |
| **Activity/Course Title** | | |  | **Location/ Venue/On-line** | | | | **Start date** | **No. of sessions** | **Hrs per session** | **Learner Numbers** | **Total**  **Funding**  **Requested** |
| 1 | | |  |  | | | |  |  |  |  |  |
| 2 | | |  |  | | | |  |  |  |  |  |
| 3 | | |  |  | | | |  |  |  |  |  |
| 4 | | |  |  | | | |  |  |  |  |  |
| **6b) Accredited Provision** | | | | | | | | | | | | |
| **Learning Aim Ref** | **Qualification Title** | **Awarding Body** | | | **Level** | **Credit value** | **Weighted funding rate** | **Start date** | **No. of sessions** | **Hrs per session** | **Learner Numbers** | **Total Funding Requested** |
| **Example** 60075892 | City & Guilds Entry Level Award In English Skills - Speaking and Listening (Entry 1) (QCF) | City and Guilds | | | Entry | 6 | £300 | September 2023 | 10 | 2 | 10 | £3000 |
|  |  |  | | |  |  |  |  |  |  |  |  |
|  |  |  | | |  |  |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- |
| 1. **Proposed Spending Profile**   *Please use a separate column for each proposed course/activity* | | | | |
|  | **1** | **2** | **3** | **4** |
| **Course/Activity Title** |  |  |  |  |
| **Tutors**  *(number of teaching hours x hourly rate.*  ***Please show calculations****)* |  |  |  |  |
| **Project management and administration**  *(number of administration hours x hourly rate.*  ***Please show calculations****)* |  |  |  |  |
| **Other staffing costs**  *(e.g. supply teacher, learning support staff, caretaker)*  *(number of hours x hourly rate)* |  |  |  |  |
| **Venue costs** |  |  |  |  |
| **Travel expenses** |  |  |  |  |
| **Resources**  *(e.g. IT, print and stationery)* |  |  |  |  |
| **Marketing** |  |  |  |  |
| **Learner Support**  *(e.g. transport, crèche)* |  |  |  |  |
| **TOTAL Funding Requested** |  |  |  |  |

**SECTION B: Due Diligence Requirements**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Organisation Details** | | | |
| Type of Organisation | |  | |
| UKPRN Number | |  | |
| Registered Company Number |  | Registered Charity Number |  |
| Company Directors |  | | |

|  |  |  |
| --- | --- | --- |
| 1. **List the qualifications and/or relevant experience of your tutors** | | |
| Name of Tutor | Teaching Qualification | Subject Qualification |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Describe any relevant experience of tutors | | |
|  | | |

|  |  |
| --- | --- |
|  | |
| 1. **Compliance (please attach relevant, up-dated policies)** | |
| **Health & Safety**  Describe what arrangements are in place to manage Health & Safety within your organisation.  Has your organisation been subject to any Improvement or Prohibition Notices or prosecution or been a defendant in any case brought under health and safety legislation within the last three years?  Describe what arrangements are in place for risk assessment of venues. |  |
| **Equal Opportunities**  Describe how your organisation ensures that it remains compliant and up to date with the Equality Act 2010. |  |
| **Safeguarding**  Describe how the safeguarding of adults (and children, if relevant) is assured within your organisation. Include information on DBS checks, any safeguarding and PREVENT training. |  |
| **Data Protection**  Describe how your organisation complies with the Data Protection Act 2018 |  |
| **Sub-contraction**  Please confirm your organisation will **not** be sub-contracting the delivery for this proposed service. | Yes  No |
| **Education and Skills Funding Agency funding**  Do you receive over £100,000 from the Education and Skills Funding Agency directly as a prime contractor *and/or* indirectly through being a sub-contractor  If yes, to the above are you on the ESFA Register of Training Organisations? | Yes  No  Yes  No |
| **Ofsted**  If applicable please provide the link to your last Ofsted inspection report. |  |
| **Insurance (attach relevant policies/certificates)** | |
| State the level of public liability insurance in place: |  |
| Please confirm that your organisation is not in the process of making a claim against any of your insurance policies |  |
| **Conflict of interest** | |
| Does anyone connected with the management/directorship/ ownership of the organisation making this tender/funding application have any relationship with any councillor or employee of West Berkshire Council, or works for the council in any way? | Yes (please give details)  No |

**Section C: Declaration**

|  |
| --- |
| I, the undersigned, declare that to the best of my knowledge the answers given in our application (and any supporting information we submit) are correct.  I confirm that all partners mentioned in this bidding form are aware of their role in this project and are committed to fulfilling their role within the timescale outlined.  I agree that I and my tutor/s will attend any training suggested by West Berkshire Council in order to meet the Council’s OFSTED quality standards.  I understand that the Council may require additional information prior to agreeing any funding and reserves the right to negotiate changes with the applicant.  I understand that the Council reserves the right to annul the application process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the applicants.  Electronic signatures are accepted.  **Name : Signature:**    **Role in project: Date:** |

**Please submit your Multiply Funding Application by email to** [aclteam@westberks.gov.uk](mailto:aclteam@westberks.gov.uk)

**The community learning team will respond to all Multiply funding applications within 2 weeks (10 working days) of receipt**