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**Internal ETB Application Form for Funding**

**Note: Projects to be completed by 2021 year-end.**

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| **Section 1 – Part 1 – Community group/project** |
| **Title of project proposed:** |  |

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| **Section 2 – project costs/funding** |
| **Cost of project** | **€** |  |
| **Grant request** (the grant amount sought in this application) | **€** |
| If the total cost of the project is greater than the amount of the grant sought, please outline where and how the balance of funding will be secured: |
|  |
| **Project costs for each of the following, where applicable (***grant amount sought for each***)** |
| **Digital Technologies** | **Learner Assistance Fund** | **Out-reach/ mentoring** | **COVID-19 Recovery Exceptional Circumstances** |
| **€** | **€** | **€** | **€** |

| **Section 3 – Project details** |
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| **Project proposed** |
|  |
| Please provide a synopsis of the project proposed under the specific funding criteria that the grant is sought for: |
| **Funding Criteria** | **Target Group(s)** | **Funding Purpose** |
| **Digital Technologies** |  |  |
| **Learner Assistance Fund** |  |  |
| **Out-reach/mentoring** |  |  |
| **COVID-19 recovery exceptional circumstances** |  |  |
| **Please include any additional information regarding the target group(s) you wish to add to support this application:** |
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| **Please provide information demonstrating how this funding intends to mitigate against educational disadvantage for the cohort you are working with:** |
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| **Please outline how the funding can complement and/or enhance the current provision of similar education in the area.** |
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| **Please clarify how this funding will support your learners to achieve positive outcomes as a result of this support:** |
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| **How will the benefits of this funding be measured?** |
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| **Please provide information on how this project represents value for money and indicate what steps the project has taken to ensure avoiding duplication with existing services in the area:** |
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| **Section 4 – Submission Details** |
| **Application submitted by** |
| **Signature** |  |  |
| **Print name** |  |  |
| **Position in ETB** |  |  |
| **Date** |  |  |

**Applications to be returned to:** *ETB to provide details of where applications should be sent*

**Closing date for receipt of applications:** *ETB to provide details*