

# Document 1

# Bid document for cross-sector partnerships grant

*Please note: although every question must be answered, scoring elements are labelled with a red box (* **XX** *), showing their corresponding document reference number*

## Particulars

#### Details of partnership lead / main contact person

Please provide details of the partnership lead or main contact person. *Please note, in the event that we require clarification or further information concerning the bid, we will contact this person*

|  |  |
| --- | --- |
| **Title** |  |
| **First name** |  |
| **Last name** |  |
| **Institution / organisation** |  |
| **Role** |  |
| **Address of institution / organisation** |  |
| **Postcode** |  |
| **Contact telephone** |  |
| **Contact email** |  |

#### Partnership details

|  |  |
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| **Name of partnership** |  |

Please provide details of the lead school/institution or entity that will receive the grant on behalf of the partnership:

|  |  |
| --- | --- |
| **lead school / institution or entity** |  |
| **Address** |  |
| **Postcode** |  |
| **Sector** |  |

Please provide details of each school / institution in the partnership:

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| --- | --- |
| **School / institution** |  |
| **Address** |  |
| **Postcode** |  |
| **Sector** |  |

|  |  |
| --- | --- |
| **School / institution** |  |
| **Address** |  |
| **Postcode** |  |
| **Sector** |  |

|  |  |
| --- | --- |
| **School / institution** |  |
| **Address** |  |
| **Postcode** |  |
| **Sector** |  |

*Please add as many schools / institutions as necessary*

Are there any other organisations involved in the partnership (eg. business partners)?

No

Yes

Please provide details such as names and nature of involvement

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## Partnership programme

#### Grant category

Please indicate which grant category you are applying for:

Seed funding grant

Expansion grant

*Please note that there are different requirements for each grant category. Please ensure you include all necessary information for your chosen grant type*

#### Formalising partnership

Please indicate that you commit to formalising your partnership through a memorandum of understanding, or similar approach (eg. service level agreement), agreed and ratified by all partners

Yes

No

If not, please state your reasons

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*Please note that ticking NO will generally result in a fail judgement unless a valid justification is given*

## Statements against criteria

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| 1A |

#### Sustainability statement

Please demonstrate how your proposal will ensure that your partnership continues on after this grant programme has finished. *Please limit your answer to no more than 2 pages*

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| 1B |

#### Mutual benefit statement

Please demonstrate how your proposal will deliver mutual benefit to all partners based on their own capacity and strengths. *Please limit your answer to no more than 2 pages*

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| 1C |

#### Tackling disadvantage statement

Please demonstrate how your proposal will use the resources from this programme to support pupils from disadvantaged backgrounds. *Please limit your answer to no more than 2 pages*

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## *Expansion grant only:* Match funding confirmation

Have you submitted a letter confirming that match funding has either been received or is committed? (document ref. 3)

Yes

No

*Please note that ticking NO will generally result in a fail judgement*

## Mandatory declarations

By signing on this page I confirm, on behalf of all partners, all of the following which are applicable:

1. I accept the department’s Terms and Conditions of Grant funding, including all additional conditions
2. I acknowledge the department may withdraw, vary or decide not to proceed with this programme at the department’s sole discretion
3. I acknowledge all costs of submitting my bid are to be borne by my organisation alone, and confirm we have no claims for costs in developing our bid from the department whether we are awarded a grant or not
4. I have provided a cost breakdown (*document ref. 2D*) of how any departmental funding will be allocated, including values per hour or per unit where applicable
5. I have provided a cost breakdown (*document ref. 2D*) of how any match funding will be allocated, including values per hour or per unit where applicable
6. *(for expansion grant only)* I have provided a letter confirming that match funding has been allocated (*document ref. 3*), provided by a senior individual acting on behalf of all partner schools/institutions

|  |  |
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| **Signature** |  |
| **Organisation** |  |
| **Role** |  |
| **Date (DD/MM/YYYY)** |  |

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# Document 2

# Appendix A to the specification (partnership proposal)

Please provide a partnership proposal under the headings outlined below (2A – 2D)

*Please note that you may submit a proposal separate to this, in your own format. However, it must, as a minimum, be clearly labelled ‘Appendix A to the specification’ and contain headings 2A to 2D*

*We do not require a set level of detail; we expect each proposal to balance the need for sufficient information to allow a considered assessment whist being proportionate to the amount of grant being sought*

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| 2A |

#### Partnership objectives

Please outline your partnership objectives

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| 2B |

#### Partnership activities

Please specify the activities that your partnership will undertake

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| 2C |

#### Impact evaluation plan

Please outline your plan to evaluate the success of your partnership, linked to your partnership objectives (2A). Include any specific targets, or Key Performance Indicators and associated remedies you will use

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| 2D |

#### Purchase and spending plan

Please specify a purchase and spending plan, that includes purchase and spending decisions and proposed timelines for the expenditure

***Expansion grant only:*** your purchase and spending plan must detail how you will spend your match funding