



Youth Service Small Grants Programme  
Application Form  
2020-21



Rebuilding the Future Together

When completing this form please read through the accompanying guidance notes. If you have any questions or need any help call us on (028) 9056 6429 / (028) 9056 6952 or email [sgp@eani.org.uk](mailto:sgp@eani.org.uk)

1. Contact person details (young person)

First name	Surname	Age	Gender
Adam	Sample	26	Male

Address (of your Youth Organisation/Youth Club)

Example Youth	
123 Youth Road	
Belfast	Postcode BT1 1AA

Contact phone number	Mobile number (if applicable)
0712345678	

Email address (this should be an email address you use and check regularly)

<a href="mailto:asample@example.com">asample@example.com</a>
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**The contact person should be a member of the youth group applying for the grant.** This will be the person we contact regarding the application (any contact will be prearranged with the youth leader). **In a small number of cases this may not be possible** and another person, for example, a youth worker or volunteer, is needed to act as the contact person. **If this is the case please explain why in the space below and submit along with the application form evidence of the group planning the activities e.g. Photos of group work or planning sheets.**

The group making the application have learning disabilities so their youth leader Adam Sample will act as the contact person. The group members have been involved in planning the project and evidence of this planning is attached.
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2. Youth Organisation

Youth Organisations must be Education Authority Youth Service registered. (See guidance notes for the role of the Youth Organisation)

2a. Complete the details below of your Youth Organisation and person in it who will support your project. (Must be completed by a leader in your Youth Organisation)

*The information provided on this form falls within the GDPR requirements, and may be made available to other departments/agencies for the purpose of preventing or detecting crime.*

Name of organisation			Example Youth		
Title	Mr	Forename	Adam	Surname	Sample
Position in organisation			Youth Worker		
Landline	02812345678		Mobile	0712345678	
Email	<a href="mailto:asample@example.com">asample@example.com</a>				
Are you registered with EA Youth Service?			Yes	X	No

**3. Project details**

**3a. Project name**

**3b. Please confirm how many children/young people are making the application?**

**3c. What is the age range of young people directly involved in making this application**

4-8		9-13	4	14-18		19-21		22-25	
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**3d. How many young people will be taking part in the overall project?**

**3e. What is the age range of young people taking part in the overall project?**

4-8	21	9-13	4	14-18		19-21		22-25	
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**3f.**

<b>Project start date</b>	<b>30/11/2020</b>	<b>Project end date (All projects must end 31<sup>st</sup> March 2020)</b>	<b>20/03/2021</b>
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