**South West Museum Development Recovery Grants**

**Application Form Round 1 & 2**

Round 1 deadline for applications - Wednesday 5 August - 12 noon

Round 2 deadline for applications - Wednesday 16 September - 12 noon

All applications to be submitted via email to museum.development@bristol.gov.uk

All guidance and information can be found at <https://southwestmuseums.org.uk/what-we-do/grants-and-programmes/>

If you have any questions about the fund or your proposed project please contact us at <https://southwestmuseums.org.uk/get-in-touch/> and select ‘Grants’ from the enquiry topic

**1. Your details**

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| Museum Name: |  |
| Address and Postcode: |  |
| Project contact name: |  |
| Project contact role: |  |
| Project contact email address: |  |

**2. Key Organisational information**

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| Organisations in receipt of Emergency funding from Arts Council England, National Heritage Lottery Fund, Historic England are ineligible for this fund. However we are aware that many museums from our region were either unsuccessful, or ineligible. Please tell us if you applied for Emergency Funding but were unsuccessful. Please state both the Funder and the value of the unsuccessful application.  |
| **Yes:** please list the funder and the value of the application request: |
| **No:** please state the reasons for not applying to the above Emergency Funding e.g. ineligible, unaware of funding, lack of capacity to apply: |
| Please state if your organisation received a **Retail Hospitality Leisure Grant[[1]](#footnote-1)** or a discretionary grant from your local authority . Please state if the grant was £10,000, £25,000 or another amount. Please state if your organisation is not eligible due to a rateable value above £51,000 or other reason for not receiving this grant. |
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| Is your Organization Volunteer led; i.e. there are no, or very few paid or contractual staff |
| Yes/No |

**3. About the project**

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| Please provide a short summary of your project (50 words).We will use this summary to share with others what you project is about. |
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| Please tell us what you project is using the following sub headings (800 words) |
| 1. What problem have you identified?2. What is your idea for overcoming this problem?3. What product, materials, equipment, content development or expertise do you need to support you in tackling the problem?4. What capacity do you have to enable you to deliver this project?5. How will you know that you have been successful?6. Why is it important that you prioritise this specific project now, over other activity?7. How will this project support your organisation and/ or local communities?8. If your project will support your community please specific groups or targets audiences? |
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| Please tell us who is responsible for delivering the project |
| Please tell us the number of volunteers responsible for delivering project tasks and estimate the total number of volunteer hours required: Please state n/a if no volunteers are involved.Please tell us the number of paid staff responsible for delivering project tasks and estimate the total number of hours: Please state n/a if no paid staff are involved. |
| Please state the expected start and end date of your project. Within these dates, list what you consider to be the key milestones of the project and if possible, provide an approximate date: (*Due to the current circumstances we understand timings may change.)* |
| Please tell us why you consider why this to be the right fund to support the proposed activity |
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**4. Project Finance**

This fund is targeted at activity which can be completed by January 2021 as the proof of expenditure and final grant paperwork deadline is 1 February 2020

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| What will you purchase with this funding? |
| Please list what goods and services your will purchase for the project and please note:* VAT registered museums must EXCLUDE the value of VAT for costs
* Non VAT registered museums must INCLUDE the value of VAT for costs

Please put ‘estimated costs’ if at the time of writing you cannot provide costs |
| A: Please List Items, Goods and Services  | B: Cost of Items, Goods and Services |
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|  |  |
| *Please insert rows if required* |  |

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| Project Funding Summary * Please include or exclude vat based on the above guidance
 |
| Total financial costs of the project *(inclusive of cash match funding*) | £ |
| Total grant funded costs of the project *(total of above column B)* | £ |
| If you are including cash match funding please state value here | £ |
| Please explain the source of your match funding e.g. from existing museum budgets: |

5. Declaration

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| Please confirm that you have authority on behalf of the applicant organisation to submit this application and to receive funds for the activity stated within the above application. |
| Name and role: |

1. <https://www.gov.uk/guidance/check-if-youre-eligible-for-the-coronavirus-retail-hospitality-and-leisure-grant-fund> [↑](#footnote-ref-1)