Health and Social Care Partnership V1 as at 18/11/2018

Innovation Fund- draft application form for comment by members of working Group

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| 1. Organisation Name and Address | |
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| 1. Nominated Contact (Name, Email, Phone) | |
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| 1. Organisational Governance | |
| What type of organisation are you e.g. SCIO: | |
| Scottish Charity Number: | |
| Company registration number: (surely we don’t need this as well as above?) | |
| Trustees/Board: please list and tell us who is chair: | |
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| 1. Proposal Details | |
| Proposal Title: | |
| Total Grant requested: | |
| Time period for expenditure of total grant: | |
| Proposal Summary (in no more than 50 words): | |
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| 1. Finance: please tick to say you have included your most recent set of audited accounts: | |
| Please state the amount of any unrestricted funds you hold (funding which is not committed or designated and not tied up in fixed assets such as a building or equipment): | |
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| 1. Is your proposal primarily focused on: | |
|  Prevention | |
|  Early Intervention (please select only one option) | |
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| 1. Please select the priority which is the main focus of your proposal | |
|  Reducing isolation |  Supported Self management |
|  Promoting healthy lifestyles |  Information and Advice |
|  Improving mental well being |  Reducing digital exclusion |
|  Building Communities | |
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| 1. Please answer the following questions, on no more than two sides of A4.   Please try to answer them individually, using the questions as headings for your responses. |
| Please tell us about the problem you wish to address with this funding?  What impact does this problem currently have on services or service users?  What practical difference do you want to make?  What do you plan to spend the funding on?  What would success look like for you if you received this funding?  How would you share any learning from this work? |