Youth Music Initiative

Training & Continuing Professional Development (CPD)

Application Form

Please read the guidelines before completing this form

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| **SECTION 1 – Applicant information** |
| Name of Organisation (if applicable) |  |
| Title |  |
| First Name |  |
| Surname |  |
| Job Title |  |
| Address |  |
| Town/City |  |
|  |  |
| Postcode  |  |
| Phone; Work:  |  |
| Mobile: |  |
| Email |  |
| Details of any special communication or physical needs |  |
| Amount applied for | £ |
| Total project cost | £ |
| Project Start Date:  |  |
| Project End Date: |  |
| Applicant Status  |
| Organisation |  | Charitable Organisation |  | Other: (Please Specify) |
| Individual |  | Limited Company |  |  |
| Have you previously **successfully** applied to the YMI CPD Fund?  |
| Yes |  | No |  |  |
| If yes, in which years did you receive funding? |
| **Please briefly tell us briefly about the work that you do** (100 words max) |
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| **SECTION 2 – Project-specific Questions and Criteria** |
| **1. Please describe the proposed training to be undertaken.** |
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| **2. Please describe how your project will develop professional practice, deliver the intended outcome of this fund and how this will benefit young people in their music-making activities?** |
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| ***Organisations/networks only (200 words max)*****3. Please describe:****- how you have considered all your staff/members/participants**’ **training requirements and detail who will undertake training. (if online training, detail how you will prioritise access for those working on out of school music projects)** **and****- if delivering an online training programme, what research you have done to ensure it will not duplicate any existing programme** |
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| **Organisations/networks only (200 words max)****4. Please describe the methods, employees or third party professionals to be employed if you are applying to design and deliver training**  |
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| **Organisations/networks only (200 words max)****5. Please describe how the training and CPD will be managed** |
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| **SECTION 3 - Budget** |
| * Include all planned income and expenditure within the form
* Provide details of partnership funding, 10% cash or in kind minimum of total project cost
* Clearly mark any unconfirmed partnership income
* Ensure total income and total expenditure figures match
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| **INCOME**  | CASH | IN KIND |
| Creative Scotland Investment Requested |  |  |
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| **SUB TOTALS** |  |  |
| **TOTAL INCOME | CASH + IN KIND** |  |
|  |
| **EXPENDITURE** | CASH  | IN KIND |
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| **SUB TOTALS** |  |  |
| **TOTAL EXPENDITURE | CASH + IN KIND** |  |
| Please describe how you have calculated any in kind income/expenditure |
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| **SECTION 4 - Supporting documents and materials checklist** |
| Please mark the relevant boxes below indicating that you have attached all the necessary documents**. Please note that if you do not provide all of the additional required information attached to your email, it will delay the decision on your application** |
| A PDF or web link to details of the proposed training |  |
| CVs of those undertaking the training |  |
| CVs of those delivering the training (Organisations/networks only) |  |
| A copy of your child protection policy (Organisation/networks only) |  |
| Creative Scotland equalities monitoring form (Download [HERE](https://www.creativescotland.com/resources/our-publications/funding-documents/equalities-monitoring)) |  |

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| SECTION 5 – Statement and signature |
| I declare this information to be accurate. I am authorised to apply for this investment. I have read the guidelines. |
| Name |  | Date |  |
| Position (if relevant) |  | Signature |  |
|  | Please type your name or include an electronic signature in this box |

Submit your completed application form with the additional supporting documents and materials to: ymitraining@scottishmusiccentre.com

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| **FOR SCOTTISH MUSIC CENTRE USE ONLY** |
| Reference Number | Date Received |
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