## C:\Users\James Proctor\Dropbox (CFLM)\CFLM Team Folder\Philanthropy Services\Donor Fund Management\Donors\BIBAs Foundation\NEW BIBAS Logo.jpg

## The BIBAs Foundation Application Form

The BIBAs Foundation, managed by the Community Foundation for Lancashire aims to support young people in Lancashire flourish, learn and develop skills or knowledge; continue or expand their enterprising work; build their capacity for the future.

To see if you are eligible to enter for a grant please answer the following questions:

* Are you based in Lancashire? Y / N
* Are you either:
* aged between 16-24 or
* a tutor who is nominating a student in this age group Y / N
* Do you have aspirations to grow an enterprising idea/project/develop skills? Y / N

**(This form is for individuals only, Community Group applicants should complete the online BIBAs Foundation application form)**

If you answered **‘yes’** to the questions then you are eligible to apply to the BIBAs Foundation.

|  |  |
| --- | --- |
| **Contact details** | |
| Applicant Name: |  |
| Referee Name (if applicable)  e.g. teacher/tutor/group leader: |  |
| Project/enterprise Name: |  |
| Applicant Address: |  |
| Postcode: |  |
| Telephone Number: |  |
| Email Address: |  |
| Date of Birth (if individual): |  |
| Name of Course (if applicable): |  |
| Name and address of school/ college/university (if applicable): |  |

|  |
| --- |
| **Encouraging enterprise** |
| Briefly outline your idea, project or course including its aims and objectives: |
|  |
| Why do you or the nominee wish to deliver this project or attend the course? How will a grant help the enterprising idea/project/development of skills? |
|  |

**Vital Signs**

Please select a vital signs theme category that your project most closely relates to **(please just select one)**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

* Arts, Culture and Heritage
* Environment
* Fairness
* Healthy Living
* Housing and Homelessness
* Learning
* Local Economy
* Rural Communities
* Safety
* Stronger Communities
* Work

|  |  |
| --- | --- |
| **The Future** | |
| How do you/nominee plan to sustain your enterprise or use the knowledge learned? i.e. plans for the future | |
|  | |
| **Costs** | |
| Please confirm how the award will be spent (use additional sheet if necessary) | |
| Description of Item(s) | Amount (£) |
|  |  |
|  |  |
|  |  |
|  |  |
|  | |
| Do/will you or the nominee work in partnership with any other people or organisations? If yes, please provide details. | |
|  | |

|  |
| --- |
| Any other Comments? If you are a Tutor please let us know why you are nominating this student. |
|  |

|  |
| --- |
| **If you are applying on your own behalf, a letter of support from a relevant person (e.g. tutor, teacher, mentor, colleague) would strengthen your application.** |

|  |
| --- |
| **Declaration** |
| Name:  Signature: Date:  Referee Name:  Address:  Signature: Date:  Relationship to applicant: |

**Proof of address and ID (copies) should be provided with your application**