**Expressions of Interest Form**

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| Name of Project: Neighborhood Project |

**1. Main Contact Details**

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| Name: |
| Address: |
| Email: | Telephone No: |

**2. Lead Organisation Details**

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| Organisation Name: |
| Address: |
| Email: | Telephone No: |
| Legal Status (Registered charity, CIO, CIC etc): |  |
| Number of employees: |  |
| Geographic coverage: |  |
| Source of funding: |  |

**3. Collaborating Organisation Details**

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| Organisation Name: |
| Address: |
| Email: | Telephone No: |
| Legal Status (Registered charity, CIO, CIC etc): |  |
| Number of employees: |  |
| Geographic coverage: |  |
| Source of funding: |  |

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| Organisation Name: |
| Address: |
| Email: | Telephone No: |
| Legal Status (Registered charity, CIO, CIC etc): |  |
| Number of employees: |  |
| Geographic coverage: |  |
| Source of funding: |  |

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| --- |
| Organisation Name: |
| Address: |
| Email: | Telephone No: |
| Legal Status (Registered charity, CIO, CIC etc): |  |
| Number of employees: |  |
| Geographic coverage: |  |
| Source of funding: |  |

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| --- |
| Organisation Name: |
| Address: |
| Email: | Telephone No: |
| Legal Status (Registered charity, CIO, CIC etc): |  |
| Number of employees: |  |
| Geographic coverage: |  |
| Source of funding: |  |

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| Please provide a breakdown of the project plan.**Max 1000 Words** |  |
| Detail the organisation’s systems and mechanisms for ensuring that staff have the appropriate and relevant level of support within the organisation or in collaboration with another organisation to ensure that they can deliver the Neighbourhood work.**Max 1000 Words**  |  |
| Evidence your organisations understanding / skills / experience of working with families with children aged 0 – 3 years and expectant families and their needs**Max 750 Words** |  |
| Detail your knowledge and understanding of the communities that make up the Better Start Bradford area**Max 1000 Words** |  |
| Please evidence your organisations compliance with Better Start Bradford social values framework**Max 1000 words** |  |
| Detail the knowledge, experience, understanding and measures in place around safeguarding in your organisation.**Max 500 words** |  |
| Please evidence your organisations skills, knowledge and experience in managing data requirements**Max 500 Words** |  |
| Please demonstrate a partnership approach to delivering this work.**Max 750 Words** |  |

**Costing Breakdown and Budget Plan**

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| --- | --- | --- | --- | --- | --- | --- |
| **Cost Heading** | **Set Up** | **Year 1** | **Year 2** | **Year 3** | **Total** | **Items Included under cost heading** |
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| **Total**  |  |  |  |  |  |  |

Please email the completed Expressions of Interest Form to Guy Dove: **Guy@bradfordtrident.co.uk**

No later than **12 noon** on **18 April 2019**