



# The Inclusive Movement

Driving Social Inclusion for All Abilities

## COMMUNITY FUND PROPOSAL

<b>DATE SUBMITTED</b>	<b>PROJECT NAME</b>
<b>ORGANISATION NAME</b>	<b>REQUESTED FUNDING AMOUNT</b>
<b>SUBMITTED BY</b>	<b>POSITION</b>

### I. PROJECT OVERVIEW

### II. STATEMENT OF NEED (HOW WAS THE NEED OF THIS PROJECT DETERMINED)

### III. PROGRAM DESCRIPTION (WHAT IS IT, WHERE WILL IT HAPPEN, WHO WILL BE INVOLVED, WHAT IS REQUIRED TO RUN, WILL IT CONTINUE PAST THE PROJECT DATES)



									TOTAL

**VII. EVALUATION (HOW YOU WILL MEASURE THE SUCCESS OF THIS PROJECT)**

**VIII. STAFF & ORGANIZATIONAL INFORMATION**

NAME & TITLE	QUALIFICATIONS	CERTIFICATIONS	SKILLS

**IX. SUPPORTING DOCUMENTATION**

FILE NAME	DESCRIPTION	LOCATION attachment / link

**DISCLAIMER**

While we strive to support as many community projects as possible, all applications will be assessed based on the merit of the determined project need, capacity to deliver and benefit to the community. In the Event that you application is not successful we encourage you to work with us to see how we may be able to strengthen your application in the future or by accessing one of our other services.
