**STI / RVNQ LEGACY FUND PROPOSAL COVER SHEET - DEADLINE: 31st March 2022**

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| **NAME OF ORGANISATION:** |       |
| **NAME OF PROGRAMME:** |       |
| **CONTACT PERSON INFORMATION** |
| **TITLE:**      | **FIRST NAME:**      | **LAST NAME:**      | **JOB TITLE:**      |
| **EMAIL ADDRESS:** |       |
| **TELEPHONE:** |       | **EXT:** |       |
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| **CANADA BASED ORGANISATION OR OUTSIDE OF CANADA?** |  **(if other please specify)**  |
| **ORGANISATION’S****ADDRESS:** |       |
| **TYPE OF****ORGANISATION:** | e.g. Charity (registered/unregistered) Not for Profit,Company. Including registration and or charity number:            |
| **ORGANISATION’S WEBSITE ADDRESS:** |       |
| **GEOGRAPHIC AREA SERVED DURING THE PROGRAMME:** | (City/County/State or Province)      |
| **MISSION OF ORGANISATION:**  |       |

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| **GRANT AMOUNT****REQUESTED:****(Canadian $)** |       | **TOTAL BUDGET FOR** **PROPOSED PROGRAMME:****(Canadian $)** |       |
| **HOW MANY CANADIAN PARTICIPANTS?** |  | **HOW MANY NON-CANADIAN PARTICIPANTS?** |  |
| **NUMBER OF INDIVIDUALS SERVED BY PROPOSED PROGRAMME:** | **0** | **AT LEAST 60% CANADIANS?** |  |
| **AGE RANGE BETWEEN 14 AND 25?**  |  |
| **HOW MANY VOYAGES ARE BEING PLANNED?** |  |
| **HOW LONG IS/ARE THE VOYAGE/S GOING TO BE? (DAYS)** |  |
| **WHICH SHIP/S WILL BE INVOLVED?**  |  **SHIP** |       |       |       |
| **WEBSITE** |       |       |       |
| **IMPLEMENTATION OF A NEW PROJECT OR EXISTING PROGRAMME?** |  |

**PROPOSAL SUMMARY**

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|      Max. 75 words |

Max. 75 Words

**NARRATIVE**

The narrative information must be presented in the text boxes below. Please respond directly and succinctly to the questions. Any words over the limit for each box will not be saved.

1. **Please provide a brief history of your organisation**.

Include a description of current and past programmes, main purpose of organisation, and how it is currently funded. Describe staff and organisational qualifications that relate to the proposed programme.

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Max. 300 words

1. **Describe the proposed programme**.

Include implementation of programme, intake, case management, programme services, placement in jobs or continuing education, and follow-up.

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 Max. 300 words

1. **Describe the youth that will benefit from the programme and their needs and/or issues.**

Include any demographic information and the number of youth to be served per programme period and indicate if the programme targets **specific disadvantaged youth populations** (such as pregnant teens, offenders, youth with mental health issues, etc.). Please include the percentage or number of young people in your programme that struggle with financial, social, or physical disadvantages.

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 Max. 200 words

1. Based on your description of the **disadvantaged youth population** you intend to serve, please describe your past experience with this group (if available) and your **outreach, recruitment and engagement strategies** to ensure your target group can access your programme.

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Max. 200 words

1. **Programme Objectives**

List the objective(s) of the programme, the action that will be taken to reach this objective, and how this action will be evaluated and assessed. Be specific. The objective(s) needs to be **measurable**; describe the “who” and “how” and be time bound. A minimum of one objective is required; additional objective boxes may be added below if needed.

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| **OBJECTIVE 1**:  |       |
| **ACTION**: |       |
| **EVIDENCE OF SUCCESS (please include KPIs)**: |       |

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| **OBJECTIVE 2 (OPTIONAL)**:  |       |
| **ACTION**: |       |
| **EVIDENCE OF SUCCESS (please include KPIs)**: |       |

 Rate the following using a Scale of 1 – 5 with **1 being Strongly Disagree** and **5 being Strongly Agree**

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| --- | --- |
| **PROGRAMME OFFERS AN ONGOING EDUCATIONAL EXPERIENCE** **(SCALE 1-5)** |       |
| **PROGRAMME PROMOTES RESPONSIBILITY** **(SCALE 1-5)** |       |
| **PROGRAMME PROMOTES LEADERSHIP** **(SCALE 1-5)** |       |
| **PROGRAMME PROMOTES LIFE SKILLS** **(SCALE 1-5)** |       |
| **PROGRAMME CONTRIBUTES TO INTERNATIONAL UNDERSTANDING AND FRIENDSHIP (SCALE 1-5)** |       |

1. **Does the programme include collaboration with other agencies/organisations/partners?**

***Please note:*** *Collaboration includes any input from other parties in the programme, including but not limited to; financial contributions, benefit in kind sponsorship, any input from political or religious organisations.*

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| **NAME:**                          | **ROLE:**                          |

1. **Marketing support for Sail Training**

Please list the marketing materials you will be able to provide STI pre, during and post the voyage, with the understanding that STI have the right to publish all such materials. Good examples (but not essential) of this would be:

* unbranded photos /videos of the voyage for social media & website use
* regular updates by blog/website
* publishing a newspaper or magazine article on the voyage (mentions of STI included)
* holding a presentation in a school, university or youth organisation on the project (mentions of STI included)
* using another way of informing the public about the project and the use of the Legacy Fund as provided by STI. Suggestions should be sent to STI at least one month before the voyage.

The organisation should provide evidence of the material no later than 2 months after the end of the voyage. Materials should be published according to data protection requirements including photo permissions of the persons shown, if photos are published.

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 Max. 200 words

**FINANCIAL**

#### **Based on your request - can you show specifically how STI funding will be utilised**

#### **(eg. staffing, travel, equipment, training etc)?**

#### **Use the template below to show the cost and proposed income for the programme:**

**TOTAL PROJECT EXPENSE (Canadian $):**

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| --- | --- | --- | --- |
| **INCOME** | **STI** | **Other Income:** | **Totals** |
| Secured**1** |       |       | $0 |
| Proposed**1** |       |       | $0 |
| **TOTAL INCOME PER FUNDING SOURCE (please add the secured and proposed columns)** | $0 | $0 | $0 |
| **FUNDING REQUESTED IS MAX. 50% OF TOTAL PROJECT COST (Y/N)** |   |

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| **1**List all sources of programme revenue secured or proposed. Be specific, for example, if total foundation support is from several foundations, please list the names of each foundation here.

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| **Secured** | **Proposed** |

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**DECLARATION**

**I declare (Please tick box):**

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| * **that I have attached my organisation’s latest audited report and accounts,**
* **that I understand that the grant will be paid in three stages and that the project is viable under this arrangement,**
* **that any vessel(s) used for the project will conform to the STI Approved Vessels**

**Guidance and attach a signed declaration by the owner(s) to this effect,** **For more information on the Approved Vessel Criteria please follow the website link below**:**https://sailtraininginternational.org/support/bursaries/** * **that STI has my organisation's permission to use material in this form and other**

**reports submitted on the project for its own promotion, publication, and dissemination****of good practice to other sail training operators,*** **that I have declared all programme collaborators as set out in this application form,**
* **that I am authorised on behalf of the organisation to submit a proposal to STI, that my agency meets all eligibility requirements, and that all information provided in this proposal is true and accurate. A full report on the outcomes of the project will be sent to STI within 6 weeks of the project’s completion.**
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| **SIGNED** |  | **DATE** |  |
|  |  |  |  |
| **NAME** |  | **POSITION** |  |

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| **PRIVACY POLICY****Sail Training International has updated its Privacy policy in line with the new GDPR regulations.****The new regulations require us to explain what data we hold about you and how we will use it.****To view our updated policy go to www.sailtraininginternational.org/privacy-policy/****By submitting this form you agree to our updated privacy policy.****If you have any questions about your data please do not hesitate to get in touch.** |

**Please return completed form to Alison.weston@sailtraininginternational.org**