# 2024-2025 Research Grant Fun Application Form



To submit a full application for the Research Grant Fund 2024-2025, please complete the form below.

**Funding Application Deadline: 31st October 2024** 

### **CONTACT PERSON INFORMATION**

Title

First Name

Please provide the details for the person who will be leading your project and will be the main point of contact for Sail Training International.

| Last Name   |   |  |  |
|---|---|--|--|
| Job Title   |   |  |  |
| Email Address   |   |  |  |
| Phone Number  |   |  |  |
| ABOUT YOUR ORGANISATION Please provide details about your organisation. |   |  |  |
| Organisation Name   |   |  |  |
| Type of Organisation  | (Charity, Registered/<br>unregistered company?) |  |  |
| Registration/Charity Number(s)  |   |  |  |
|   |   |  |  |
| Organisation Website  |   |  |  |
| Organisation Website Address 1  |   |  |  |
|   |   |  |  |
| Address 1   |   |  |  |

SAIL TRAINING INTERNATIONAL. CHARITY NUMBER 1096846. A COMPANY LIMITED BY GUARANTEE (REGISTERED IN ENGLAND NO 4686048)

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## ABOUT YOUR PROJECT

Please provide details about your research project.

| Project Name  |  |  |  |
|---|--|--|--|
| Grant amount Requested  | GBP £  |  |  |
| Total Budget for Proposed Project   | GBP £  |  |  |
| Total Number of Participants  |  |  |  |
| Proposed Participant Demographics   |  |  |  |
| <b>Describe your Proposed Research Project</b> – Include details regarding the proposed hypothesis, aim, data collection method and research methodology. Include a brief background why you are seeking to research this area and the demographic details of the proposed study subjects. <b>Max 300 Words</b> |  |  |  |
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| timeline of your research project including was approximately when you'll be allocating the   | neline-Please include details regarding the implementation when you'll be conducting the different phases of your research and grant funds. Please also include a timeline of project deliverables orts and final reports. NOTE funding will be paid as milestones and |  |  |
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| Describe the benefit and insight you hope to gain from this research and how it may contribute to the International Sail Training Community.   |   |  |  |
|--|---|--|--|
|  |   |  |  |
| Please describe your history and/or experience with conducting research of this nature and if you will receiving support from another person, mentor, or organisation. – Sail Training encourages both new and experienced researchers to apply for the grant. Max 200 Words |   |  |  |
|  |   |  |  |
| PROJECT OUTCOM List the objective(s) of the evaluated and assess   | ne project, the action that will be taken to reach this objective, and how this action will |  |  |
| Please be specific – The   | objective(s) need to be measurable: describe the "who" and "how" and be time bound.         |  |  |
| A minimum of one object  | ctive is required.  |  |  |
| Objective 1  |   |  |  |
| Action   |   |  |  |
| Evidence of Success  |   |  |  |
|  |   |  |  |
|  |   |  |  |
| Objective 2  |   |  |  |
| Action   |   |  |  |



| Evidence of Success   |  |                            |  |
|---|--|----------------------------|--|
| Objective 3   |  |                            |  |
| Action  |  |                            |  |
| Evidence of Success   |  |                            |  |
|   |  |                            |  |
|   |  |                            |  |
| Objective 4   |  |                            |  |
| Objective 4   |  |                            |  |
| Action  |  |                            |  |
| Evidence of Success   |  |                            |  |
|   |  |                            |  |
|   |  |                            |  |
| DOES THE PROJECT ORGANISATIONS OF   |  | I WITH ANY OTHER AGENCIES, |  |
| 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.  ORGANISATION NAME  ORGANISATION ROLE |  |                            |  |
|   |  |                            |  |
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## **FINANCIAL INFORMATION**

Please provide the following financial information for the project. If you do not have funding for any of the areas please enter 0.

| areas please enter 0.   |     |       |       |
|---|-----|-------|-------|
| INCOME  | STI | OTHER | TOTAL |
| Secured <sup>1</sup>  | £   | £     | £     |
| Proposed <sup>1</sup>   | £   | £     | £     |
| TOTAL INCOME PER FUNDING SOURCE   | £   | £     | £     |
| $^{1}$ Please 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. |     |       |       |
| SECURED INCOME PROPOSED INCOME  |     |       |       |
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Is the funding amount requested from Sail Training International less than 50% of overall project funding?

| <u>ADDITIONAL INFORMATION - Please outline how the proposed funds will be used?</u> |
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### **DECLARATION**

Please tick the following to agree:

| I WILL SUBMIT   | VILL SUBMIT MY ORGANISATIONS LATEST AUDITED ACCOUNTS   |          |  |  |
|---|--|----------|--|--|
| I UNDERSTAND THE GRANT WILL BE PAID IN MILESTONES BASED ON MY PROPOSED PROJECT DELIVERABLES UNDER THIS ARRANGEMENT  |  |          |  |  |
| I AGREE TO COI<br>COMPLETION.   | I AGREE TO COMPLETE AND DELIVER THE PROJECT EVALUATION WITHIN 6 WEEKS OF THE PROJECT COMPLETION. |          |  |  |
| I AGREE THAT SAIL TRAINING INTERNATIONAL HAS MY ORGANISATIONS PERMISSION TO USE THE MATERIAL IN THIS FORM, AND OTHER REPORTS SUBMITTED ON THE PROJECT, FOR ITS OWN PROMOTION, PUBLICATION AND DISSEMINATION OF GOOD PRACTISE TO OTHER SAIL TRAINING OPERATORS |  |          |  |  |
| I HAVE DECLARED ALL PROJECT COLLABORATORS AS SET OUT IN THIS FORM   |  |          |  |  |
| I CONFIRM, I AM AUTHORISED ON BEHALF OF THE ORGANISATION TO SUBMIT A PROPOSAL TO STI, I/WE MEET ALL ELIGIBILITY REQUIREMENTS AND ALL INFORMATION PROVIDED IN THIS PROPOSAL IS TRUE AND ACCURATE.  |  |          |  |  |
| I HAVE READ AND AGREE TO SAIL TRAINING INTERNATIONALS PRIVACY POLICY.  www.sailtraininginternational.org/privacy-policy/  |  |          |  |  |
|   |  |          |  |  |
|   |  | · r      |  |  |
| SIGNED  | (Not necessary<br>for email submissions)   | NAME     |  |  |
| DATE  |  | POSITION |  |  |