**Get Out, Get Active (GOGA) Application Form**

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| **Organisation Name:** |  |
| **GOGA Project Title:** |  |
| **Name of Person completing this form:** |  |
| **Position in Organisation:** |  |
| **Name of Project Coordinator:** |  |
| **Address:** |  |
| **Email Address:** |  |
| **Contact Telephone Number:** |  |
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| 1. **What does your organisation do and where are you based?** |
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| 1. **Project Description: Please describe your project, the physical activities you will deliver and how it will meet the GOGA programme brief. (Max 500 words)** |
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| 1. **Please tell us the type of project you would like to deliver, the amount you are applying for, the timescale of delivery and when you expect the project to start/end: (Please note all projects must conclude by 31st March 2026).** | | |
| Long Term | Projects Lasting up to 12 Months |  |
| Short Term | Projects Lasting up to 6 Months |  |
| Actual Timescale of Project: | | |
| Expected Start Date: | | |
| Expected End Date: | | |
| Amount Applying for: £ | | |

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| 1. **What audience will your project target?** | | |
| Lower Socio-Economic Groups | Families | Children/Young People  0-19 |
| **Socially Isolated Groups**: | | |
| BAME | Veterans | Older Adults |
| Disability | | |

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| 1. **How many people will your project target?** |
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| 1. **Using the below, please advise the location and ward where your project will be based?** |
| * **Sunderland North Area** (i.e. – Hylton Castle, Fulwell, Redhill, St Peters, Southwick) |
| * **Sunderland East Area** (i.e. – Doxford, Hendon, Millfield, Ryhope, and St Michaels) |
| * **Sunderland West Area** (i.e. – City, Barnes, St Chads, Silksworth, St Anne’s, Sandhill and Pallion). |
| * **Coalfield Area** (i.e. – Houghton, Copt Hill, Hetton and Shinney Row) |
| * **Washington Area** (i.e. – Washington Central, Washington West, Washington North and Washington South) |
| * **South Tyneside** |
| * **County Durham (East Durham)** |

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| 1. **How will you connect and engage with the least active disabled and non-disabled members of your target audience to gain knowledge and insight about them? (Max 500 words)** Please see community engagement toolkit on pages 3-10 of the application guidance for more information. If you have already completed community engagement with your target audience, please use this space to explain how you achieved this and what you found. |
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| 1. **How will you co-produce your project with disabled and non-disabled members of your target audience and keep them involved in decision making throughout? (Max 500 words)** Please see community engagement toolkit on pages 3-10 of the application guidance for more information. If you have already completing work in this area, please use the space below to explain how you are achieving this and what you found. |
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| 1. **How will your project create an inclusive environment to support the least active disabled and non-disabled people of your target audience to be active together? (Max 500 words)** |
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| 1. **How will your project recruit, support and develop volunteers, peer mentors and/or ambassadors to promote and support the delivery of your physical activities? (Max 500 words)** |
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| 1. **Please provide information below on how your project will deliver against the ‘10 Talk to me Principles’ (Please see page 2 of the application guidance for more information on each principle):** | |
| 1. **Use the channels I already trust** |  |
| 1. **Stay local to me** |  |
| 1. **See me as an individual** |  |
| 1. **Talk to as many of my values as possible** |  |
| 1. **Continue to fulfil my values in new ways – My Life Story** |  |
| 1. **Reassure me I am going to fit in** |  |
| 1. **Make me feel that I can do it** |  |
| 1. **Make it easy for me to tell you my needs** |  |
| 1. **Ensure my first experience is good** |  |
| 1. **Encourage me through existing advocates** |  |

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| 1. **How will your project leave a legacy for those who take part in it?** (I.e., Will it sustain participants physical activity beyond the project; signpost participants to other opportunities and/or support participants into volunteering or qualification opportunities). |
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| 1. **What support does your organisation require from the Foundation of Light to successfully run your project?** (I.e., Training/CPD, staffing, volunteer recruitment and development). |
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| 1. **What funding would your organisation need to make this ambition a reality? What will you spend your budget on?** | | | |
| Cost | Total Cost | GOGA Funding | Match Funding |
| Staff Costs |  |  |  |
| Facility Hire |  |  |  |
| Promotion and Publicity |  |  |  |
| Transport and Travel |  |  |  |
| Equipment |  |  |  |
| Community Engagement |  |  |  |
| Admin |  |  |  |
| Gift in Kind |  |  |  |
| Other Expenses- Delivery |  |  |  |
| Other Expenses - Incentives |  |  |  |
|  | | | |
| Total |  |  |  |

**Declaration:**

The information contained in this application is accurate. I confirm that the organisation has all the relevant procedures, processes, and governance arrangements in place to deliver the project. Please use checklist below.

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| Please check that you have all the following in place and tick to confirm | |
| Answered all sections |  |
| Said how much funding you are requesting |  |
| Provided a full breakdown of costs |  |
| Confirmation of any match funding support |  |
| Application Signed |  |
| Confirmation that your organisation can supply risk assessments (covid and non-covid related) for your project. |  |
| Your organisation’s governing document is attached (e.g. This can include but is not limited to Constitution or memorandum and Articles of Association, Trust Deeds, Community Interest Report, evidence that your organisation has three or more directors, that are not related. |  |
| Confirmation that your organisation has child and adult safeguarding processes and policies in place and all staff delivering your project are DBS checked. |  |
| Confirmation that your organisation has insurance policies in place to deliver your project (Public Liability and Personal Accident Insurance) |  |

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| Print Name: |  |
| Signature: |  |
| Position within Organisation and Date: |  |

**Please return all completed applications to Jade.Gilbertson@foundationoflight.co.uk before Friday 23rd May 2025.**

**Should you need any support in completing the application or have any questions, please do not hesitate to contact Jade Gilbertson on the above email address or contact (0191) 563 4749.**