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**The Goldsmiths’ Centre Grants for Organisations:   
Crafting our Future Together**

**Expression of Interest Form for Large Grants (£10,000 - £20,000 inc. VAT):**

Once you have read the Goldsmiths’ Centre’s Funding Guidelines, please complete this Expression of Interest form, and email it to Julia Skilton ([julia.skilton@goldsmiths-centre.org](mailto:Julia.skilton@goldsmiths-centre.org)). Please note that this process is mandatory, full applications will not be considered without receipt of this initial document.

We acknowledge all Expressions of Interest on receipt, and will respond within 4 weeks to discuss your proposal further.

**Expression of Interest: Project Details**

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| --- | --- |
| **Project name:** |  |
| **Organisation:** |  |
| **Contact details:** |  |
| **Please list any additional partners and their role and responsibilities within the project:** |  |
| **Please give a short description of your project. (500 words max)** |  |
| **Who is your audience?** |  |
| **What is the timeframe for the project?** |  |
| **How does your project meet the Goldsmiths’ Centre’s charitable purpose?** |  |
|  |  |
| **How do you plan to collaborate with the Centre and any additional partners in the delivery of this project? Are there key outcomes that you have prioritised for evaluation?** |  |
| **If applicable, what are the long term financial plans for the project?** |  |

**Funding details:**

|  |  |
| --- | --- |
| **Please provide an outline budget (including for VAT where applicable), showing the total required to deliver the project, and a breakdown of the funds requested from the Goldsmiths’ Centre. Please note that Trustees will not fund contingency budgets.** | |
| **Cost Heading** *(i.e. Salaries)* | **Amount (£)** |
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| **Total** |  |

**Declaration:**

We/I hereby certify that the information contained here is complete and accurate to the best of our/my knowledge.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title & Organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_