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PROJECT PROPOSAL FORM



Please fill out this form in as much detail as possible.

| Project Leader/Team contact details: | |
|---|--|
| Name: | Student ID Number: |
| Mobile: | Email: |
| Course Name: | Current Year of Course: |
| Project Outline: Please include your aims, who/w need? How have you identified this? | hat you are hoping to help. Is your project in response to a local |
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| | need and think about how many volunteers you will need. How ct? Please provide a breakdown of anticipated costs. If you are |
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| Partners: Are you partnering with any other chari | ties or organisations? If so, please give details. |
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| Timeline: Give an approximate timetable for the d | elivery of your project, including start and end dates if applicable. |
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| Promotion and Marketing: How will you promote your project? | |
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| Sustainability: How will you ensure your project is sustainable? Will it be continuous or one off? | |
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| Risk: If successful you will be asked to fill out a risk assessment. At this stage, can you identify what risks may be involved in this project? | |
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| Monitoring and Evaluation: How will you monitor results and evaluate the success of your project? | |
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A committee consisting of the Vice President Student Involvement, Membership Services Manager, Volunteering and Societies Coordinator and Societies and Volunteering Assistant will consider your application.

A member of this committee will let you know the result of the decision within three weeks.

If you have any questions or queries while filling in this form, please do not hesitate to contact the Volunteering and Societies Coordinator: call 01494 601 603 or email **jane.bower@bucks.ac.uk**