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| Text, company name  Description automatically generated  **LMEP innovative activity application form 2022-23**  **for delivery by partners during the academic year September 2022 to July 2023** | |
| **Cashback for:**  Innovative activity grant up to £500 | |
| **Apply at anytime** | |
| **Name of school** |  |
| **Contact person email** |  |
| **School phone number** |  |
| **School cost centre no.** |  |

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| **What is the name of your Innovative Activity?** |
| **What are the dates of your activity?** |
| **Describe the activity. What are the main outcomes?** |
| **How does it fit with your schools’ priorities and those of Leeds’ Children and Young People’s Plan?** |
| **How many pupils will take part? Is it targeted to particular pupils and what will the gender balance / ages / key stages be?** |

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| **Where and when will the activity take place and how long will each session be?** | |
| **Who will deliver the activity and who will you work in partnership with?** | |
| **What will the legacy be?** | |
| **What is the full cost of your activity?** | **How much LMEP funding do you require?** |
| **What funding in addition to the LMEP grant will you have?** *E.g. participant fees, school PTA, other grants or sponsors, concert sales, cluster school contributions.* | |
| **How will you spend the LMEP grant if your application is approved?** | |

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| I have read and agree to the Terms and Conditions in Section E of the LMEP Offer to Schools (please tick) | |  |
| Signature (Headteacher) |  | |
| Date |  | |

**Please email this form to** [**LMEP.artforms@leeds.gov.uk**](mailto:LMEP.artforms@leeds.gov.uk) **and keep a copy for your records.**