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| **Name of Applicant(s):** |
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| **Name of Project:** |
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| **Are you applying as a young person or as part of an organisation?** |
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| **If you are applying as a young person, please state your age:** |
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| **School, College, Youth Group or Organisation Name:** |
|  |
| **Contact Email:** |
|  |
| **Contact Phone Number:** |
|  |
| **Address:** |
|  |
| **What would you like to do for Feeling Good Week 2022?** |
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| **Please tell us how this meets the theme of “Body Positivity”**  **If it does not meet the theme, please tell us how it meets the specific identified needs of the Children and Young People the project is aimed at** |
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| **How much will you need for your project? (maximum of £500)** |
|  |
| **What will young people get out of your project and what impact will your project have? Please consider the longer-term sustainability for their health and wellbeing, and how the skills gained/resources purchased could be used in the future to support other young people** |
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| **How have, and how will, young people be included in your project?** |
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| **Please provide a breakdown of how the money will be spent (e.g. workbooks £20, refreshments £100):** |
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| **Where did you see the advert for Feeling Good Week?** |
|  |
| **Are you aware of the CAMHS newsletter?** |
| **Yes  No** |

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| **PLEASE READ AND COMPLETE THE AGREEMENT BELOW TO ENSURE YOUR BID IS NOT REJECTED** |
| If my bid is successful, I …………………………………………………… [Name] agree to use the funds offered by the panel to host events/activities in support of Feeling Good Week 2022.  I understand that the funding is a one-off payment and must be spent wholly on the events/activities outlined in the bid proposal.  Any underspend of the allocation may be reclaimed by Hertfordshire County Council.  Any variation in use of the funding must be agreed in advance by CAMHS Commissioning.  In agreeing to accept this funding I also undertake to inform CAMHS Commissioning as to how the funds have been used, and to supply a feedback report on the outcomes by 6 May 2022.  Name or Signature:  Position (if appropriate):  Organisation (if appropriate):  School number (HCC-maintained schools only):  Date: |
| **Please send your completed application form to:**  [camhs.commissioning@hertfordshire.gov.uk](mailto:camhs.commissioning@hertfordshire.gov.uk)  **Please note, unless there is an issue with your application, bids will not be acknowledged by email. Due to the volume of bids received, it is not possible to provide feedback on unsuccessful bids.** |