A cover of a book

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**West Berkshire Council Community Education Fund (Round 39)**

**Full Bid Proposal Form**

* ***Please read the bid guidance notes to help you complete this form.***
* ***Complete sections A, B and C.***
* ***Section A is scored. Section B contains due diligence information and is not scored. Section C is for signature.***
* ***Submit your bid by email to*** [***aclteam@westberks.gov.uk***](mailto:aclteam@westberks.gov.uk) ***by 5pm Friday, 17th May 2024.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Organisation:** |  | **Address:** |  |
| **Project Title:** |  | **Postcode:** |  |
| **Project Manager:** |  | **Telephone:** |  |
| **Finance Manager:** |  | **Email:** |  |

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| **Please indicate the funding strand, total number of learners and funding requested** | | | |
| **Funding Strand** | **Number of adult learners** | **Number of children** | **Funding requested** |
| **Adult Skills: Tailored Learning (non-accredited)** |  |  | £ |
| **Adult Skills** **(accredited)** |  | N/A | £ |
| **Total learners and funding** |  |  | **£** |

**SECTION A**

**(*Questions 1-6 are scored*)**

All Community Education Fund supported provision is delivered in line with the Ofsted Education Inspection Framework. This approach reflects the 3Is: Intent, Implementation and Impact that underpin the planning, delivery and evaluation of the community learning service.

**INTENT:**

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| 1. **Project Overview** | | |
| 1. **Priority Groups** (*Please tick the groups you will be targeting).* | | |
| Adults with disabilities and learning difficulties | |  |
| Vulnerable older adults | |  |
| Adults who are unemployed or under employed | |  |
| Adults with no qualifications or low levels of skills | |  |
| Adults with mental health issues | |  |
| Parents/families who need help to support their children’s learning and development | |  |
| Ex- offenders and probation clients | |  |
| Adults with or recovering from drug or alcohol dependency | |  |
| Adults/families suffering from domestic abuse | |  |
| Carers of vulnerable adults/children | |  |
| Young unemployed adults aged 16-18 years | |  |
| Other (please specify) | |  |
| 1. **Project Aims** *(List the main aims of your project).* | | |
|  | | |
| 1. **Project Description** *(Describe the project/course programme. Include any previous experience of engaging and/or delivering to your target groups).* | | |
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| 1. **Identifying local need and working in partnership** | | |
| 1. **Describe how you have identified the need for your programme/course.** | | |
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| 1. **Describe how you will work with other organisations to reach your target groups and deliver your project.**   *List any partners.* | | |
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| **Name of Partner** | **Role in project** | |
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| **Implementation:** | | | | | | | | | | | | |
| 1. **Delivery Plan***(Complete the delivery plan below)* | | | | | | | | | | | | |
| **Tailored Adult Education (non-accredited)** | | | | | | | | | | | | |
| **Course Title** | | **Target Group** | | **Partners** | | | **Venue** | **Start date** | **No. of sessions** | **Hrs per session** | **Learner Numbers** | **Total**  **Funding**  **Requested** |
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| **Adult Skills (accredited)** | | | | | | | | | | | | |
| **Learning Aim Ref** | **Qualification Title** | | **Awarding Body** | | **Level** | **Credit value** | **Weighted funding rate** | **Start date** | **Number of sessions** | **Hours per session** | **Learner Numbers** | **Total Funding Requested** |
| **Example** 60075892 | City & Guilds Entry Level Award In English Skills - Speaking and Listening (Entry 1) (QCF) | | City and Guilds | | Entry | 6 | £300 | September 2023 | 10 | 2 | 10 | £3000 |
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| 1. **Delivering** **Personalised Learning** |
| 1. Describe your approach to personalised learning**.** *How will you ensure the course takes into account the learners’ experiences and individual needs?* |
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| 1. Describe how you plan to embed English, maths and digital skills in the teaching and learning. |
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**IMPACT**

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| 1. **Success and Progression** |
| 1. Describe how you will know that your project has been successful. |
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| 1. Describe how you will support learners to progress in their learning. |
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| 1. **Value for Money** | | | | |
| 1. **Proposed Spending Plan (for Tailored Adult Education (non-accredited) provision)**   *Please complete a separate column for each course* | | | | |
|  | **Course 1** | **Course 2** | **Course 3** | **Course 4** |
| **Course Title** |  |  |  |  |
| **Tutor**  *(Number of teaching hours x hourly rate.* ***Please show calculations****)* |  |  |  |  |
| **Project management and administration**  *(Number of administration hours x hourly rate.*  ***Please show calculations****)* |  |  |  |  |
| **Other staffing costs**  *(e.g. supply teacher, learning support staff, caretaker)*  *(number of hours x hourly rate)* |  |  |  |  |
| **Venue costs** |  |  |  |  |
| **Travel Expenses** |  |  |  |  |
| **Resources**  *(e.g. print and stationery)* |  |  |  |  |
| **Marketing** |  |  |  |  |
| **Learner Support**  *(e.g. transport, crèche)* |  |  |  |  |
| **TOTAL Funding Requested** |  |  |  |  |

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| 1. **Pound Plus**   *CEF funding is a contribution towards costs. Providers need to demonstrate how they are providing ‘pound plus’. Pound Plus relates to everything that providers can generate in addition to their funding allocation.* *Show how ‘in kind’ resources or matched funding will be available and where possible the value.* | |
| **Venue** | £ |
| **Volunteers** *(to be costed at £11.09 per hour)* | £ |
| **Project Management** | £ |
| **Administration** | £ |
| **Partner Contribution** | £ |
| **Schools – use of pupil premium** | £ |
| **Use of specialist facilities/resources** | £ |
| **Fee Income** | £ |
| **Other (please specify)** | £ |
| **TOTAL** | £ |

**SECTION B: Due Diligence Requirements**

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| 1. **Organisation Details** | | | |
| Type of Organisation | |  | |
| UK PRN Number | |  | |
| Registered Company Number |  | Registered Charity Number |  |
| Company Directors |  | | |

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| 1. **List the qualifications and/or relevant experience of your tutors.** | | |
| Name of Tutor | Teaching Qualification | Subject Qualification(s) |
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| Describe any relevant experience of tutors. | | |
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| **9. Compliance** | |
| 1. **Health and Safety** |  |
| Describe what arrangements are in place to manage Health & Safety within your organisation. |  |
| Has your organisation been subject to any Improvement or Prohibition Notices or prosecution or been a defendant in any case brought under health and safety legislation within the last three years? |  |
| Describe what arrangements are in place for risk assessment of venues. |  |
| 1. **Equal Opportunities** |  |
| Describe how your organisation ensures that it remains compliant and up to date with the Equality Act 2010. |  |
| 1. **Safeguarding** |  |
| Describe how the safeguarding of adults (and children where relevant) is assured within your organisation. Include information on DBS checks, any Safeguarding training and radicalisation awareness training. |  |
| 1. **Data Protection** |  |
| Describe how your organisation complies with the Data Protection Act 2018 |  |
| 1. **Matrix** |  |
| Do you have Matrix accreditation? | Yes  Date of accreditation:  No |
| 1. **Sub-contraction** |  |
| Please confirm that your organisation will **not** be sub-contracting the delivery for this proposed service. | Yes  No |
| 1. **Education and Skills Funding Agency funding** | |
| Do you receive over £100,000 from the Education and Skills Funding Agency directly as a prime contractor *and/or* indirectly through being a sub-contractor.  If yes, to the above are you on the ESFA Register of Training Organisations? | Yes  No  Yes  No |
| 1. **OFSTED** |  |
| Please state your last Ofsted inspection grade (where relevant) and the date it was achieved. | Grade:  Inspection Date: |
| 1. **Insurance** |  |
| Please state the level of public liability insurance in place |  |
| Please confirm that your organisation is not in the process of making a claim against any of your insurance policies |  |
| 1. **Conflict of Interest** |  |
| Does anyone connected with the management/directorship/ ownership of the organisation making this tender/funding application have any relationship with any councillor or employee of West Berkshire Council, or work for the council in any way? | Yes (please give details)  No |

**Section C: Declaration**

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| I, the undersigned, declare that to the best of my knowledge the answers given in our application (and any supporting information we submit) are correct.  I confirm that all partners mentioned in this bidding form are aware of their role in this project and are committed to fulfilling their role within the timescale outlined.  I agree that I and my tutor/s will attend any training suggested by West Berkshire Council to meet the Council’s quality standards and the requirements of the Education and Skills Funding Agency who provide the funding for the Community Education Fund.  I understand that the Council may require additional information prior to agreeing any funding and reserves the right to negotiate changes with the applicant.  I understand that the Council reserves the right to annul the application process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the applicants.  **Name : Signature:**  **Role in project: Date:** |

**Please submit your bid to** [aclteam@westberks.gov.uk](mailto:aclteam@westberks.gov.uk) **by** **5pm Friday, 17th May 2024**