PROJECT REFERENCE FORM – GRANTS PROGRAMME

We require a supporting reference for each application; please identify someone independent and knowledgeable about your project and your work. We may contact your referee for additional supporting information.

Please complete first two questions before giving form to referee

Name of Group/Organisation applying for grant:

Name of lead contact person:

Referee Details

Name of referee:

Address:

Telephone (Day):

(Eve):

(Mob):

Email (required):

How long have you known the Project?

Have you seen a copy of the Project's application to the Grants Programme? YES

NO

If YES, please ensure that you check that it is completed correctly against the guidelines?

From your previous knowledge of the Project, do you feel that the organisation has the structures and capacity to manage their project? YES

NO

Please give reasons for your answer

Do you feel confident that the organisation has the necessary skills and experience in child protection procedures or are able to seek assistance in developing a child protection policy, which outlines the required procedures? YES NO

Please provide an explanation for your answer

Are there any other comments you would like to make regarding the organisation or their application?

Thank you for providing a reference.

I can confirm that I know the group that has applied for the funding but have no direct involvement in its activities. I have read the application and support the request for funding. I can be contacted to discuss the project further to this written reference.

Name:	
Signed:	
Date:	