# Next Steps Grants Scheme

**Grant Application Form**

Whether planning to reopen to the public or choosing to remain closed, we want to support museums in the coming months to prepare effectively, develop resilience and maintain community links. Thanks to support from the Art Fund, SHARE Museums East is offering grants to help museums with essential work arising from the Covid-19 crisis that meets these aims.

All guidance and information can be found [here.](http://www.sharemuseumseast.org.uk/support/share-statement-on-coronavirus/coronavirus-helpline/) Please make sure you have read the guidance and made use of the free [SHARE helplines](http://www.sharemuseumseast.org.uk/support/share-statement-on-coronavirus/coronavirus-helpline/) before you apply to us. It may be that these consultants will be able to help you so that you do not need to apply for this grant, or you may decide to frame your application in a certain way because of their advice.

If you have any questions about the fund or your proposed work please contact us at [sharemuseumseast@norfolk.gov.uk](mailto:sharemuseumseast@norfolk.gov.uk)

**The deadline for submission is midday 31 July 2020.** Please note we cannot accept any applications after this date. All applications to be submitted via email to [sharemuseumseast@norfolk.gov.uk](mailto:sharemuseumseast@norfolk.gov.uk)

**1. APPLICANT DETAILS**

|  |
| --- |
| Museum Information |
| Museum name: |
| Museum Accreditation number: |
| Museum address: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact details of the person leading on this activity** | | | |
| **Name and role:** | | | |
| **Telephone:** |  | **Email:** |  |

**2. CURRENT FUNDING**

|  |  |
| --- | --- |
| **We will give priority to organisations that DID NOT receive Emergency funding from Arts Council England, National Heritage Lottery Fund or Historic England.** | |
| Have you accepted Emergency Funding from the above organisations? | **YES/NO** |

**3. GUIDANCE AND RISK ASSESSMENT**

|  |  |
| --- | --- |
| **We are encouraging all museums to read through the relevant guidance and checklists for museums. Whether planning to reopen or not, there is much to consider – from safe site access to the wellbeing of those working from home.** | |
| **Please confirm that you have completed a COVID Risk Assessment (as per page 6 of the NMDC guidance)** | **YES / NO** |
| **Please explain how your risk assessment has informed this application:** | |
| **If you are applying for funds to reopen your museum, please confirm that you have assessed financial viability with support from our SHARE Helpline Business Consultant, Julie Cole** | **YES / NO** |

**4. YOUR ACTIVITY**

|  |  |
| --- | --- |
| **What type of work will the grant support? (you can select more than one)** | |
| **Effective Reopening** | **YES / NO** |
| **Sustainable museums** | **YES / NO** |
| **Meeting Audience Needs** | **YES / NO** |

|  |
| --- |
| **Describe the reasons and need for this work** *(150-300 words)* |
| *HINT… Think about:*   * *What problems have you identified?* * *What opportunities have you identified?* * *Why is it important that you prioritise this work now?* |

|  |
| --- |
| Please give a summary of the work that you plan to deliver with the grant *(150-300 words)* |
| *HINT… Also think about:*   * *What materials, equipment or expertise do you need to support you in tackling the problems you have identified?* * *What capacity do you have to deliver this work successfully (staff / volunteers / other support)?* |

|  |
| --- |
| What difference will this work make to your museum? *(up to 150 words)* |
| *HINT… Think about:*   * *How will you know it has been successful?* |

|  |
| --- |
| **In which ways does this activity support your community?** This section is not mandatory, but completing it will strengthen your application *(150-300 words)* |
| *HINT…Think about the potential impact for:*   * *Partnerships with other community groups and/or local organisations* * *Encouraging a wider range of visitors to your museum* * *Local economy* * *How it might improve access to your site and collections* * *Impact on staff and volunteers’ wellbeing* |

**5. COST BREAKDOWN**

**PLEASE NOTE:** museums cannot apply to cover the costs of activities that have already occurred or are currently running, or expenditure incurred before a grant offer is made.

|  |  |
| --- | --- |
| **Please indicate the amount of funding you are applying for** (maximum award is £5,000 and we ask for a **10% cash or in-kind match funding contribution** from you to the total cost of the project) | |
| **Amount requested** | **£** |

|  |  |  |
| --- | --- | --- |
| Itemised expenditure (add more lines if necessary). See Guidance for notes on VAT. | | |
| **Description** | **Date delivered by** | **Amount** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total costs** |  | **£** |

|  |  |
| --- | --- |
| **Other Funding:**  please detail contributions (in-kind support or cash) you will make to this activity | |
| Cash match funding | £ |
| In-kind match funding *(see Guidance for how to calculate)* | £ |
| **Total contributions / other funding** | **£** |

**6. DECLARATION**

|  |
| --- |
| **I certify that, to the best of my knowledge, the information given in this application is correct.** |
| **Signature** *(scanned or typed signature is permissible if this form is sent from the signatory’s email)***:** |
| **Position:** |
| **Contact details** (telephone and email): |
| **Date:** |

|  |
| --- |
| **Please provide a brief statement of support** from one person from your museum at a senior level e.g. Chair or Director. |
| **Name and position:** |
| **Contact details** (telephone and email): |
| **Supporting Statement** (max 150 words): |
| **Signature** *(scanned or typed is permissible if a confirmatory email is sent from the signatory’s email)***:** |

|  |  |
| --- | --- |
| **Please confirm that you have discussed your Next Steps Grant application with your county Museum Development/Partnership Officer** | **YES / NO** |

**APPLICATION CHECKLIST**

|  |  |
| --- | --- |
| **Have you attached…?** | |
| Evidence for expected costs e.g. quotations, estimates, price lists for equipment | **YES / NO** |
| Evidence of 3 quotes for work over £1000 | **YES / NO** |
| Any additional documents you feel would support your application, e.g. risk assessments, evidence of consultation or planning | **YES / NO** |

Please return your application and supporting documents by **midday 31 July 2020** by e-mail to:

[**sharemuseumseast@norfolk.gov.uk**](mailto:sharemuseumseast@norfolk.gov.uk)

**PLEASE DO NOT POST A PAPER COPY**

**WE ARE UNABLE TO ACCESS OUR OFFICE OR POST.**