M Y C O O L

**M U S I C F O U N D A T I O N**

*Making a difference through music*

*Charity No. 1191740*

**NOMINATION FORM**

**FOR INDIVIDUAL SMALL GRANTS FUNDING**

**FOR YOUNG PEOPLE 12 – 18 YEARS**

Name of Nominating Adult:................................................................................

Name of Young Person

being nominated for a grant: .............................................................................

Date of application: .............................................................................

Form App3 12-18/ 2023

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*Making a difference through music*

***PURPOSE OF MYCOOL MUSIC FOUNDATION***

*MyCool Music Foundation has been established as a registered charity to extend the charitable work begun by MyCool Singers and use the therapeutic power of singing and music to have a positive impact on the health and well being of individuals and communities.*

Form App3 12-18/2022

**PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING YOUR FORM**

**NOMINATION FORM**

**FOR INDIVIDUAL SMALL GRANT FUNDING FOR YOUNG PEOPLE 12 – 18 YEARS**

**The MyCool Music Foundation has made available a fund which will provide small grants** to support young people between the ages of 12 and 18 years of age, who are disadvantaged in any way, who wish to undertake music related initiatives that will enhance their musical education and support them to achieve their full potential – in terms of both musical and/or personal development and wellbeing. Musical can be interpreted as instrumental, vocal and composition related.

**For those under 18 the Foundation will accept applications made by a nominating adult**, on behalf of the young person. The young person, must however, be fully involved with and supportive of the proposal.

**Nominations are now invited** and will be assessed against the following criteria which are born out of the objectives of the Foundation. At least one of the following criteria must be met by the nomination.

1. Enable individuals to express themselves, improve their health and promote well being and enhance their lives through the promotion of singing and music.

2. Through access to choirs and/or music workshops, provide benefits from the therapeutic value of singing or musical engagement

3. Provide support for gifted and talented young people from disadvantaged/less privileged backgrounds to develop their musical and associated aspirations.

4. Advance music related education and support disadvantaged young people in various locations, by offering them opportunities to engage in music and singing activities, to include, but not limited, to individual classes, workshops and choirs.

**Examples of what grants might be used to provide:**

* Mentoring in music related activities
* Singing coaching
* Music lessons
* Performance development
* Development of song writing skills
* Musical composition
* Some other music related activity/learning

**To apply for a grant please complete the attached nomination form**

**and submit to MyCool Music Foundation**

**HOW TO SUBMIT YOUR APPLICATION FORM:**

**Electronic application forms** should be emailed to: [enquiries@mycoolmusicfoundation.org](mailto:enquiries@mycoolmusicfoundation.org)

**If you need a printed/hard copy application form**

please contact[enquiries@mycoolmusicfoundation.org](mailto:enquiries@mycoolmusicfoundation.org) **or phone: 0300 365 4566**

**If you have any queries about the application process or require further information,**

**please email:** [info@mycoolmusicfoundation.org](mailto:info@mycoolmusicfoundation.org)

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(Form App3 12-18/2022))

|  |  |  |  |
| --- | --- | --- | --- |
| NOMINATION FOR INDIVIDUAL SMALL GRANT FUNDING  FOR YOUNG PEOPLE 12 – 18 YEARS OF AGE  (For individuals requiring financial support for mentoring/musical/vocal/personal development etc.) | | | |
| **1** | **NAME OF**  **NOMINATING ADULT:** | **First name:**  **Surname:** | |
| **2** | **CONTACT DETAILS OF NOMINATING ADULT:** | **Address:**  **Phone:**  **Email:** | |
| **3** | **RELATIONSHIP TO THE YOUNG PERSON BEING NOMINATED**  *(e.g.: Parent, carer, relative, teacher, mentor, friend)* |  | |
| **4** | **NAME OF YOUNG PERSON BEING NOMINATED** | **First name:**  **Surname:** | |
| **5** | **AGE OF YOUNG PERSON** | **Age:** **Date of birth:** | |
| **6** | **TELL US ABOUT THIS YOUNG PERSON AND WHAT SORT OF HELP THE GRANT WOULD PROVIDE**  **This might include:**   * *Relevant background* * *Musical interests or experience* * *Their ambitions or needs* * *What the grant would provide* * *How this provision would help the young person*   ***NB if this is a hand written application, please use a continuation sheet if necessary for this section****.* |  | |
| **7** | **HOW WOULD THE YOUNG PERSON BENEFIT FROM THIS GRANT?**  *e.g. Become a confident performer – Improve personal confidence/self esteem – improve health and well being - pursue a career -join a band – Become a musician/vocalist* |  | |
| **8** | **POSSIBLE START DATE:** |  | |
| **9** | **REFEREE:**  *Please give details of someone who can provide a reference for the young person– it should be* ***someone who is not a relative*** | **NAME OF REFEREE:**  **ADDRESS:**  **PHONE:**  **EMAIL:**  **OCCUPATION OR RETIRED OCCUPATION OF REFEREE:**  **HOW LONG HAS REFEREE KNOWN THE YOUNG PERSON:**  **IN WHAT CAPACITY DO THEY KNOW THE YOUNG PERSON**  (e.g. Friend, Minister, Colleague,Teacher) | |
| **10** | **FUNDING REQUESTED AND EXPENDITURE**  *Tell us how much money the young person would like and what it will specifically be spent on.* | **How much money do you require:** | **£** |
| **Item of expenditure**  *(list below)* | **Cost** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Estimated total cost** | **£** |
| **11** | **OTHER SOURCES OF FUNDING**  *Please tell us if applications have been made by the young person for other sources of funding.*  *If yes to the above please tell us how much has been requested/secured.and relevant organisation/donor.* | **Applications made for other funding: Yes No**  *(Please tick or delete as appropriate)*  **Name of organisation approached for funding:**  **Successful Yes No**  **Not successful Yes No**  **Awaiting outcome of application Yes No** | |
| **12** | **ACKNOWLEDGEMENT TO MYCOOL MUSIC FOUNDATION (MCMF)** | *If the young person achieves success in their musical endeavour, will they be willing to acknowledge the role of MCMF in supporting them?*  **YES the young person will acknowledge MCMF’s support subsequently in their success.**  **NO the young person will not acknowledge MCMF’s support subsequently in their success.**  **If NO to the above please provide explanation:** | |
| **13** | **PROVISION OF PHOTOGRAPHS, PUBLICITY MATERIAL, NARRATIVES** | *Is the young person willing to allow MCMF to make reference to their use of a MCMF grant in publicity material?*  **Yes No**  *Are they prepared to provide/allow MCMF to use photographs or other publicity material, narratives*  **Yes No**  **Any further explanation relating to above response.** | |

**PLEASE READ AND SIGN THE FOLLOWING STATEMENT TO SUPPORT YOUR APPLICATION FOR FUNDING:**

I confirm that the information provided in the above application form is, to the best of my knowledge, true and accurate and the young person has been fully involved in this application

**Signature of Nominating Adult: .................................................................................................**

**Name** *(Please print)****:.....................................................................................................................***

***Date: ......................................................................................................................................***

**Please answer question overleaf: ‘How did you hear about MyCool Music Foundation and its funding programme?’**

|  |  |  |  |
| --- | --- | --- | --- |
| **HOW DID YOU HEAR OF THE MYCOOL MUSI C FOUNDATION AND ITS FUNDING PROGRAMME?** *(Please tick or indicate yes as appropriate below and provide further information as appropriate)* | | | |
| 1 | From the MCMF website |  |  |
| 2 | Social media – state which specifically |  |  |
| 3 | Word of mouth - source |  |  |
| 4 | Other – please state |  |  |