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| **Question**  | **Response**  |
| *The DFE HAF guidance should be read and understood prior to completion of this application.**Please also ensure that you have read the application guidance linked to this document.* ***Details of you and your organisation****Name of organisation:*  |  |
| *Please give a brief overview of your organisation:* |
| *Address of organisation:*  |  |
|   |
| *Website address:*  |   |
|   |
| *Email address for Main Contact Person for all correspondence:*  |  |
|   |
|  |
| *Contact phone number:*  |  |
|   |
| *Company or Charity number:*  |  |
|   |
| *Please provide the full address of the venue where your HAF activities will take place:*  |   |
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| ***Your HAF Programme***  |
| *Please give a* *summary of what you plan to deliver for the HAF programme?* *Please add* *your detailed timetable. Please ensure that you include how the activities link to the guidance around healthy lifestyles and signposting.*  |  |
|   |
| *How many places will be available per session for FSM children and young people?:*  |  |
|   |
| *Will you be providing other places on the programme for non-eligible children and young people?:* *(if “yes” please state how these will be funded including cost for privately paying families.)* |  |
|   |
| *What dates are you delivering?:*  |  |
|   |
| *What times are you delivering (start and finish)?:*  |  |
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|   |
| *What age range will your provision cater for?:*  |   |
|   |
| *Please tell us about the food that you will serve. This must be healthy and served hot:* *Please tell us about the activities you intend to offer and explain how they are enriching, including information about any external agencies you intend to work with:**How do the planned sessions meet the HAF Programme's standards around* ***physical activities****:**What activities are planned around* ***healthy eating, healthy lifestyles and/or positive behaviours****:**Please tell us about how you will engage with* ***families and carers:****What specific measures have you planned around* ***signposting and referrals for families****:* ***Budgets and Finance****Please upload your detailed budget proposal .*  |   |
|   |
| *What is the total amount of funding you are requesting from HAF?:**Top tip- double check that the amount above is stated in the budget proposal.*  |  |
|   |
| *Will you be using funding from any other sources, if so please tell us about this? Failure to disclose other funding sources may affect your application.*  |  |
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| *How will your provision be inclusive to everyone, including children with Special Educational Needs or Disabilities (SEND)?:*  |   |
|  *How are you informed about specific dietary requirements and allergies?* |
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|   |
| *Please tell us the name of the organisation preparing your hot food and its star rating?:**Please confirm that the organisation preparing your hot food will do so in line with the school meal standards:*  |  |
|   |
| *A condition of the funding is that all providers use the HAF programme's standard data collection and monitoring. This will include collecting names, address and DOB of participants. Data collection will be via the Eequ Booking system. Do you commit to using the Eequ booking system for all HAF attendees?* |   |
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|  *Top tip- do not submit holding documents- all uploads must be in date and meet the criteria set out.* |
| *Please upload your safeguarding policy:*  |  |
|   |
| *Please provide the details of your Safeguarding Lead, please include their name, contact telephone number, and email address:*  |    |
|   |
| *Please upload your public and employee liability insurance documentation (Public liability insurance coverage must be at least £10,000,000. Employee liability insurance coverage must be at least £5,000,000):*  |  |
|   |
| *Please upload your health and safety policy:*  |  |
|   |
| *Please upload your organisations policy or statement on accessibility and inclusiveness:*  |  |
|   |
| *Applicants must hold the Quality in Action Award via Action Together, or agree to achieve the award as a condition of the grant. :*  |  |
|  *Application Checklist. Please ensure that all the below steps have been taken. Incomplete applications will not be presented to the HAF Moderation Panel.*1. I confirm that I have read and understood the HAF guidance
2. *I confirm that all members of staff working on the HAF provision have read and understood the HAF guidance*
3. *I confirm that all staff working on HAF understand the obligation to provide all the HAF standards as committed to in this application.*
4. *All required documents are uploaded*
5. *Venue is secured*
6. *I have answered all questions fully*
7. *The budget proposal document is complete and reflects all costs requested*
8. *Activity timetable is accurate and includes detailed information*
 |
| *Declaration:*  |   |