

Ward Action Plan Budget Proposal Form

Please read the Guide to the Community Plan Budget before you fill in this form

Then complete Section 1: Budget Proposal.

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If you are proposing to deliver the project yourself, please complete Section 2: Delivery agency as well. We can help you with this or do it for you – see who to contact in the Guide to Community Plan Budget.

Continue or separate sheets if you need to, or expand the boxes if you are filling in the form electronically.

LEICESTER CITY COUNCIL

- 8 JAN 2010

Section 1: Budget Proposal

1. Name of Ward

Freemen Ward

RECEIVED
MEMBERS' SUPPORT

2. Title of proposal

Independent Education Advice

3. Name of group or person making the proposal

Peter Thomsen Saffron Resource Centre

4. Short description of proposal. Please include information on how the money will be spent, who will benefit, when they will benefit, and how we will know when the proposal has been successful.

It is important that your answer to this question is clear and detailed, because we will only pay the costs when we can see evidence that the outcomes you describe here have been achieved. You can provide further details in your supporting information if you want to.

Most Saffron Resource Centre service users live in Freemen Ward. Freemen families continue to seek independent advice + representation to challenge decisions regarding school exclusion, special educational needs, disability discrimination and school choice. Saffron Resource Centre is committed to promoting school inclusion. Improved school inclusion relates to the problems of lack of youth provision, graffiti and anti social behaviour set out in the Ward Action Plan 2009-10. We are looking for a £2000 contribution to operating costs for six months.

5. Which priority or priorities in the Ward Action Plan does your proposal support? (Add further rows or continue on a separate sheet if needed).

Priority number and priority description (taken from the Ward Action Plan)
anti social behaviour / graffiti
lack of youth provision

6. Have you provided any supporting information?
 for further information please see www.stcentre.org.uk

Tick if yes

7. What is the total cost to the Community Meeting?

£6000

8. How have you estimated or calculated the cost? Please show each item of expenditure and say whether it is an estimate or an actual cost.

Item	Cost £	Estimate or actual cost?
Salary for 6 months half time	5184	
Salary on-costs (12%)	622	
management/accommodation (20%)	1161	
Total requested from this fund (to be added to a further £1000 of funding application)	2000	
Total	2000	

9. Have you tried to get funding for this project from anywhere else, either in the Council or from another organisation? If so, please give details

Formal applications have been made to:
 Community Legal Advice Centre / Leicester City Council
 Parenting Fund Application (2 year funding)
 Equality + Human Rights Commission Application (3 year funding)
 Local Extended Schools Services

The last successful grant application for education advice was awarded by Saffron Neighbourhood Management and expired in March 2009.

This advice service has continued without external funding since that time. Internal resources for this advice work are now exhausted.

10. Who proposed the project? Please provide contact details.

Name of contact person	Peter Thomson
Your position in organisation or group	(Half-time) Advice worker
Name of organisation or group	Independent Education Advice
Address Saffron Resource Centre 432 Saffron Lane Leicester LE2 6SB	
Phone number 0116 283 7212	Email Peter.Thomson@stcentre.org.uk

Section 2: Delivery agency (this could be a single person, group of people or a group or organisation)

11. Who will deliver the project? Please provide contact details.

Name of contact person	Peter Thomson
Your position in organisation or group	Advice worker
Name of organisation or group	Independent Education Advice
Address Saffron Resource Centre 432 Saffron Lane Leicester LE2 6SB	
Phone number 0116 283 7212	Email Peter.Thomson@stcentre.org.uk

12. Declaration

I have read the *Guide to the Ward Action Plan Budget* and I accept the arrangements described in that guide. I confirm that the information I have given on this form is true. I will inform the council immediately if any of the information I have given on the form changes.

Name	Peter Thomson
Signature	Pt Thomson
Date	8/1/10

Please send this completed form back to:
Karen Shelton, Member Support Team, 2nd Floor, Town Hall, Leicester City Council, Leicester, LE1 0PS