

Reference no

Log no

For office use

Area Board Projects and Councillor Led Initiatives Application Form 2016/2017

To be completed by the Wiltshire Councillor leading on the project Please ensure that you have read the Funding Criteria before completing this form PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED 1. Contact Details Area Board Name Calne Area Board **Your Name** Howard Marshall Contact number **e-mail** Howard.marshall@wiltshire.gov.uk 2. The project **Project Title/Name** Intergenerational Project 'Music, Memory and Quality of Life' Please tell us about This project was presented by Pat Donlan to the LYN and is to involve a number of the project /activity partners, including Dementia Action Alliance, The Magna Carta Group, The LYN, you want to and the residential homes or links with the community necessary for the project. organise/deliver and why? The project begins with a large Dementia Friends session to a whole year group at Important: This section John Bentley. Following this they will ask for 12 volunteers to move into phase 2. is limited to 900 These young people will be trained by Pat Donlan and through the DAA in research characters only methods, interview skills, befriending, additional knowledge of dementia and (inclusive of spaces). supported as they embark on this project. The young people will then be partnered with an adult living with Dementia. They will help them identify music which helps to trigger memories. The young people will find and download the music onto a music device and help the adult and carers use the device so they can use it into the future. Calne Where is this project taking place? When will the project take place? 2017 What evidence is there that this .This is an innovative project which fulfils some of the area boards pledge project/activity needs to take place/be to partner with the dementia action alliance and the young people's pledge funded by the area board? to become dementia friends. The evidence for potential success of the project has been presented to the LYN by Pat Donlan who has done some great research into this sort of work.

	The young people in the wider group will become dementia friends adding a large amount to our communities total making Calne a dementia friendly town. The smaller group will be learning excellent skills that they will be able to take into further project work and their future careers as well as the outcomes for the adults involved who will have positive experiences with young people and a tangible product that will continue for longer than the project		
Community Issue? (if so, please give reference number as well as a brief description)	Dementia Action Alliance		
Does this project link to the Community Plan or local priorities? (if so, please provide details)	Social Isolation		
Is this project supported by the Local Youth Network or Community Area Transport Group? (if it relates to young people or highways and transport	The LYN are putting this forward as a LYN initiative		
What is the desired outcome/s of this project? That a whole year group will be Dementia Friends and 12 young people and 12 adults will take part in a successful intergenerational project			
Who will be responsible for managing this project? Pat Donlan			
3. Funding			
hat will be the total cost of the project? £1000			
How much funding are you applying for? Please note that only capital funding is available	£1000		
If you are expecting to receive any other funding for your project, please give details	Source of Funding	Amount Applied For	Amount Received
		0	
Please give the name of the organisation and bank account name (but not the number) your grant will be paid in to. (N.B. We cannot pay money into an individual's bank account)	To be held in Area Board Account		
4. Declaration – I confirm that			
The information on this form is correct and that any grant received will be spent on the activities specified			
Any form of licence, insurance or other approval for this project will be in place before the start of the project outlined in this application			
Name:		Date:	
Position in organisation:			

Please return your completed application to the appropriate Area Board Locality Team (see section 3)