

# **Creative Minds Fund**

**APPLICATION FORM** 

## **Test**

**CREATIVE MINDS FUND** 

1. What is the name of the organisation that manages the m	nuseum?
* 2. What is the name of the museum?	
2. What is the name of the museum:	
3. What is the museum's address?	
* Line 1	
Line 2	
Line 2	
Line 3	
* City/Town	
City/ lowii	
* Postcode	
* 4. Please provide copies of your last two years of indepen	dently examined accounts
i. I tease provide copies of your tast two years of independ	dentity examined decodings.
No ite	ems selected
NO Tec	
File Size	

1. Applicant

* 5. What is the name of the organisation you are partnering with for this project?		
* 6. What type of organisation is your partner organisation? le. Charity, SCIO, public body		
Charity		
If you selected 'Other' for the organisation type above, please enter the type here:		
7. Primary Contact		
For audit purposes, there must be at least two named contacts at your organisation for any application, each with their own account in MGS Online. Please ensure that a primary contact and a signature authority are identified here. Bear in mind that if your application is successful, you will also need a third contact to take on the role of 'Financial authority' for the grant. We must be able to contact the primary contact during office hours, so make sure that the phone number you give is one that is being answered during the day. If we cannot contact you, we may not be able to progress with the assessment of your application.		
* First Name		
* Last Name		
* Job Title		
* Email Address		
* Telephone		

## 8. Signature Authority

The signature authority is the person in the organisation who has authority to plan for and prioritise applications. Bear in mind that if your application is successful, you will also need a third contact to take on the role of 'Financial authority' for the grant. In order to sign this application later in the process, the signatory authority name here will be asked to log in to the system on their own account. The same person cannot act as both Primary Contact and Signature Authority by using different log-in details.

* First Name	
* Last Name	
* Email address	
* Telephone	
9. Is your museum accredited? (if yes please skip to question 13)	
Yes or No?	~

# 2. Organisation

10. Does the museum meet the agreed Museums Association definition of a museum?
The Museums Association definition of a museum (1988) is:
"Museums enable people to explore collections for inspiration, learning and enjoyment. They are institutions that collect, safeguard and make accessible artefacts and specimens, which they hold in trust for society."
Please describe how your organisation meets the definition. You may wish to highlight the size and type of your collection, and now the public can access the collections and learning. (max 300 words)
11. Is the museum a physical site/space/building and is it open to the public for a minimum of 20 days per year?
Please provide details of your opening hours/arrangements
12. What kind of constitution does the organisation managing the museum have?  Only formally constituted organisations that are charities or not for profit organisations with their own bank account will be eligible. The organisation managing the museum must be the legal owner of all or part of the collections that the museum manages and displays.
Charity Number (if relevant)
Company Number (if relevant)
Who is the legal owner of the museum's collection?
What percentage of the collection that your organisation cares for and displays does the organisation own?

## 3. Fair work

In order to be eligible for MGS funding organisations must be able to demonstrate compliance with the Scottish Government's Fair Work First policy which requires workers to receive payment of the real Living Wage and have access to appropriate channels for effective voice. The is a Scottish Government requirement for all recipients of public funding implemented from 1 July 2023.

\* 13. Can you confirm that you have submitted your Employer Declaration?



If you have not submitted your Employer Declaration please contact the grants team at grants@museumsgalleriesscotland.org.uk as soon as possible.

# This section is for you to give us a brief overview of your project - you can go into more detail in the next section. \* 14. What is the name of your project? Titles should be brief, descriptive of the project and suitable to be carried forward as the permanent project name. \* 15. When does your project start? Your project must not start before the published decision date for this round of funding. Your project must start within 6 months of the decision date. The date format should be DD/MM/YYYY \* 16. When does your project end? Your project must complete within 18 months of the project start date. The date format should be DD/MM/YYYY \* 17. Please provide a short summary of your project (100 words max) We may publish this summary to share with others what your project is about. There is the opportunity to describe your project in more detail later in the application.

18. Have you completed an expression of interest? If so, who did you speak with?

**Project Details** 

5.	5. Tell us more about your project				
* 19.	Tell us about the mental health organisation that you are working with				
work	e describe the organisation, the focus of their work, the mental health services the organisation provides, and how they with people. Tell us about your organisations relationship with your partner, how long your organisations have been working her, how the partner has been involved in the planning of this project, and what the partner's role in the project will be.				
* [ple	ease submit your partnership agreement here]				
File	Size				
* 20.	Tell us about your project				
activi you w	e describe your project proposal including the participants you intend to work with and how you will recruit them, the ty you will carryout, who will be involved in the project and its delivery, where the project will take place, what resources vill need in order to deliver the project. Please include information about the skills that your organisation and partner have enable you to deliver this project. Let us know about any work you will do to prepare for this project.				
* 21.	Tell us about the need and opportunities for your project				
•	in the need for this project, how you identified the need, and why this project is an appropriate solution for that need. Why this project need to happen now?				
* 22.	What do you hope this project will achieve for your participants?				
How v	will you measure the impact of this?				

* 23. What do you hope this project will achieve for your organisation, and your partner organisation?		
How will you measure the impact of this?		
* 24. How will you ensure your project?	e that everyone involved in the project will be safe and supported throughout and at the end of	
	on with consideration of participants, staff and volunteers of your organisation and your partner and the general public. How will your support participants at the end of your project?	
[please upload your safe	guarding policy here]	
File	Size	
* 25 What challenges ma	y arise during your project? How would you deal with these challenges?	
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• •	allenges and unexpected changes. Please consider what challenges your project might face and explain gate risks, or deal with challenges as they arise.	
* 26. What will the legacy	y of the project be?	
	happen when the project ends for your organisation and your partner organisation? Do you anticipate organisations? How will you embed learning from this project across your organisations?	

## \* 27. Please complete the project plan below

Activity	When will it happen?	Where will it happen?	Who will be involved?	Who will be responsible?

# 6. Budget

* 28. Are you able to reclaim VAI?
Before completing the project budget table, please confirm your VAT recovery status. We need to know this as we are unable to
include in a grant any element of VAT that your organisation will be able to recover. If you are VAT registered and can recover VA

on the items listed in the budget, you must not include that VAT in the table.				
Yes				
○ No				
Sometimes				
29. If you have answ	vered Sometimes, please	explain your VAT recovery pos	sition here.	
* 30. What are the f	full costs of your project	?		
cost recovery on pro- direct project costs a explain how the cost can include a line for	jects so you should only li and not a contribution to has been arrived at (e.g. r contingency if there is a	ources of funding, but <b>not in-kin</b> ist costs attributed to your own or general operating costs/overhea, hours and rate of pay for addit realistic expectation that prices for capital works and 5% for othe	organisation which can be ds or management fees. U ional staff time, formal qu s may change between sub	shown to be additional lse the notes field to note, online research). You
Item	Supplier	Cost (ex VAT)	VAT if irrecoverable	Notes
		£ 0.00	£ 0.00	
* 31 Amount you as	re requesting from MGS			
£	e requesting from MOS			
* 32. Is your organis	ation making a financial	contribution? If so, what is the	amount of that contribut	tion?
£				

#### 33. Other income sources

Please include any other income you have secured, or hope to secure, from your partner organisation or any other organisation to deliver this project. This could be other grants, sponsorship or income generated from project activity. Include the date this support has been confirmed or when you are expecting a decision to be made.

Funding source	Amount	Date Confirmed
	£ 0.00	

Please ensure that the amount you are requesting from MGS, your organisation's financial contribution and other income sources add up to the total project cost. We need to see that you have sufficient resource to fund the whole project.

#### 34. If your budget includes any posts or contracts, upload the job description(s) and brief(s) here

The documents should clearly set out the duration of the post or contract, the rate of pay or fee and, in the case of job
descriptions, the hours to be worked. Please see our guidance
https://www.musoumsgalloriosscotland.org.uk/fundings/dovoloning-vour-project-and-application/

https://www.museumsgalleriesscotland.org.uk/fundings/developing-your-project-and-application/ (https://www.museumsgalleriesscotland.org.uk/fundings/developingyour-project-and-application/)

No items selected		

Size
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### 35. If you or your partner organisation are contributing in-kind support to deliver this project, you can show this here.

These costs should not be included in the budget table but can be shown here to make it clear that necessary resource is in place. You can include things like use of a room, vehicle or equipment, volunteer hours or contribution from a marketing budget. Do not include existing staff time.

Item/resource	Contribution details	Estimated value of Contribution (£)
		£ 0.00

## 7. Declaration

knowledge and I agree to advise Museums Galleries Scotland immediately of any variation to the details provided or if the project cannot proceed. <b>Enter your full name</b>		
Enter today's dat	<u> </u>	