

**Student-Led Volunteering Project Proposal Form**

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| --- | --- |
| **Name of Event** |  |
| **Type of Event** |  |
| **Proposed Date of Event \*** |  |
| **Target Audience** |  |
| **Proposed Location of Event** |  |
| **Expected Numbers to Attend**  |  |

\*If a recurring event then list date as “Monthly” or “Every Wednesday” etc.

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| **Contact details for event organisers** |
| **Name** |  |  |
| **Role** |  |  |
| **Email** |  |  |
| **Phone** |  |  |

**Please complete this section with as much detail as possible.**

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| **What are you planning to do?** |
|  |
| **What are the aims and objectives of the event?** |
|  |
| **Will you have a team of volunteers to help with your event? Please outline who they are and what they will be responsible for.** |
|  |
| **Please provide information of any specialist equipment that may be required.**  |
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**Budgeting your event**

**Expected Income**

|  |  |  |
| --- | --- | --- |
| **Will there be a door charge or donation made?** |  |  |
| **Description** | **Price** | **Expected numbers** | **Total income** | Actual (to be completed by Volunteering Coordinator) |
| Student | £  |  | £ | £ |
| Non-student | £  |  | £ | £ |
| External sponsorship | £  |  | £ | £ |
| Other income | £  |  | £ | £ |
| **Total expected income** | £  | £ |

**Expenditure Costs including VAT**

|  |  |  |
| --- | --- | --- |
| **Type** | Estimated (to be completed by Society) | Actual (to be completed by Volunteering Coordinator) |
| Venue Hire/ Accommodation/ Facilities | £  |  |
| Entertainment/ Live Acts | £  |  |
| Guest Speakers | £  |  |
| Promotion Material | £  |  |
| Decorations | £  |  |
| Equipment | £  |  |
| Prizes | £  |  |
| Refreshments | £  |  |
| Transport | £  |  |
| Security | £  |  |
| Other (Please Specify) |  | £  |  |
| **Total Expenditure** | £  |  |

**Activity Proposal Summary**

|  |  |
| --- | --- |
| **Total expected income**  | £ |
| **Total budgeted expenditure** | £  |
| **Event profit/loss \*include a + or -** | £  |

 **This Volunteering Project Proposal Form should be signed by a minimum of TWO current students who are part of the delivery team.**

|  |  |  |
| --- | --- | --- |
| **Name** | **Signature** | **Position** |
|  |  |  |
|  |  |  |

**If you require funding to deliver this activity, you may request a grant from the Volunteer Office. Please complete the section below. This will be considered by the Volunteer Office and you will be informed by the Volunteering Coordinator after a decision has been made.**

|  |  |
| --- | --- |
| **Funding Request from Volunteer Office** | £  |
| **Reasons for Funding Request** |  |

**For Volunteer Coordinator purposes only**

|  |  |  |  |
| --- | --- | --- | --- |
| **Approved/Rejected** | **Reason for rejection** | **Signature** | **Date** |