

Part I: Details of the proposed activity(ies) under the project **Order of priority** _____
(This Form should be sequenced as indicated in Part H.)

1.	[Nature of Activity C3: Social/Communication Skills Training] Name of Activity: _____		
2.	Name of Collaborating School (if applicable): <small>(One form for <u>one</u> collaborating school / centre only. Please photocopy this page if you wish to apply for more than one collaborating school / centre.)</small>		
3.	<input type="checkbox"/> Activity for one collaborating school only <input type="checkbox"/> Activity for the community without collaborating school		
4.	Briefly describe the objectives and contents of the activity: _____		
5.	Estimated no. of eligible students served (count by heads)[#]: _____, including _____ non-Chinese speaking (NCS) students, _____ special educational need (SEN) students and _____ newly-arrived children (NAC). [#] For activity serving the community without collaborating school (refer to pt. 3) or special school, please indicate the estimation separately: _____ primary students (including _____ NCS students, _____ SEN students and _____ NAC) & / or _____ secondary students (including _____ NCS students, _____ SEN students and _____ NAC).		
6.	Estimated no. of fee-charging non-eligible students^(vii) (count by heads): _____ students (if applicable)		
7.	Date(s): from _____ / _____ / _____ to _____ / _____ / _____		
8.	No. of group(s)^(x): _____, Instructor-student ratio per group: _____:		
9.	Activities per group:	a) _____ session(s) _____ hrs per session Venue ⁽ⁱⁱⁱ⁾ : _____	b) Half-day (at least 4 hrs): _____ times Venue: _____ District: _____
			c) Whole day (at least 7 hrs): _____ times Venue: _____ District: _____

Breakdown of the budget for the proposed activity:

10. Breakdown of expenditure items^{(v) & (vi)}

(a) Instructors' remuneration^{(viii)&(x)}: \$ _____ (/hr) × _____ hrs(/session) × _____ sessions × _____ groups = (\$) _____
 Social Worker: \$ _____ (/hr) × _____ hrs(/session) × _____ sessions × _____ groups = (\$) _____
 Other staff: \$ _____ (/hr) × _____ hrs(/session) × _____ sessions × _____ groups = (\$) _____
 (State their status and reasons for the employment: _____)

(b) Material expenses: (\$) _____

(c) Camp / Admission fee: \$ _____ × _____ persons (\$) _____

(d) **Student** meal: (Only for whole-day outdoor activities) : \$ _____ × _____ persons (\$) _____

(e) Activity transportation fee (Only for outdoor activities or camping)
 (no. of minibus: _____ / no. of coach : _____ / Other: _____) (\$) _____

(f) Volunteers allowance: (No. of volunteers: _____; total no. of attendance: _____) (\$) _____

(g) Others (Please specify: _____) (\$) _____

11. Total expenditure (A) (=) (\$) _____

12. Breakdown of income

(a) Charge on Non-eligible students^(vii) \$ _____ × _____ persons (\$) _____

(b) Others (Please specify: _____) (\$) _____

13. Total income (B) (=) (\$) _____

14. Grant applied (A – B) (=) (\$) _____

- Remarks:**
- (v) For administration cost, please fill in Part J(2).
 - (vi) If the enrolled students are less than the approved number, NGO should reduce the number of groups and all expenses on a pro-rata basis.
 - (vii) Non-eligible students – students who have to pay fee to join an activity. These students must pay full fee.
 - (viii) Qualifications of instructors are specified in Guideline for Community-based Projects found in our Community-based Projects web-page.
 - (x) The number of groups equals the number of instructors to be employed.

(*Delete whichever is not applicable)

Confirmed by Collaborating School:
 Name: _____
 Signature: _____
 Date: _____
 Position: *School Principal / Teacher-
 in-charge
 School Chop: