

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 C2: Development of Self-confidence] Name of Activity: _____		
2.	Name of Collaborating School (if applicable): <small>(One form for one 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⁽ⁱ⁾ (count by heads): _____ students (if applicable)		
7.	Date(s): from _____ / _____ / _____ to _____ / _____ / _____		
8.	No. of group(s)⁽ⁱⁱ⁾: _____, Instructor-student ratio per group: _____:		
9.	Activities per group:	a) _____ session(s) _____ hrs per session Venue: _____ District: _____	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^{(iii) & (iv)}

(a) Instructors^(v) remuneration: (\$) _____ (/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 (\$) _____ × _____ persons (\$) _____
 (b) Others (Please specify: _____) (\$) _____

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

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

Remarks:

- (i) Non-eligible students – students who have to pay fee to join an activity. These students must pay full fee.
- (ii) The number of groups equals the number of instructors to be employed.
- (iii) For administration cost, please fill in Part J(2).
- (iv) 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.
- (v) Qualifications of instructors are specified in Guideline for Community-based Projects found in our Community-based Projects web-page.

(*Delete whichever is not applicable)

Confirmed by Collaborating School:

Name: _____

Signature: _____

Date: _____

Position: *School Principal/Teacher-in-charge

School Chop: _____