

**SUBMISSION FOR CLSD PROGRAM PROJECT FUNDING 2018/2019**

Request for $xxx CLSD Program project funding for the [title of project] from [name of CLSD Program region]

**AIM OF THE PROJECT**

Briefly state the aim(s) of the project and the proposed strategy to deliver it

**NEED FOR THE PROJECT**

**How will the project provide, facilitate or enhance access to free legal assistance services for disadvantaged and vulnerable people in this CLSD Program region?**

Provide details here

**Who is the target group/s for the project?**

Provide details here

**What is the evidence of need?**

Provide details here

**Considering the evidence of need and the target group, why is the proposed strategy the most appropriate to meet the identified need?**

Provide details here

**How will this project enhance access to legal services for disadvantaged people in this CLSD Program region? What difference do you want to make?**

Provide details here

**PROJECT DETAILS**

**Which CLSD Program partners are involved in the project?**

Provide details of all involved here – including “lead” agency and partner agencies

**Has the project been discussed with other CLSD Program partners?**

Provide details of consultations here

**How does the project fit in with CLSD Program aims, objectives and strategies? How does the project fit within the Action Plan priorities for this CLSD Program region?**

Provide details here

**How will the project be implemented?**

Provide details here

**How long will the project run for?**

Provide details here

**PROJECT EVALUTION**

**How will you evaluate the project?** ***Focus on what you can measure.  
 What information will you collect that tells you this?  
 If you want to demonstrate that an intervention caused a change, you will need to collect and show some baseline data as well data about the change***

Provide details here

**How will the results of the project be reported on/disseminated?**

Provide details here

**Will any resource/product be produced as a result of the project?   
 *If "yes", what will happen to this product/resource and how will it be maintained or updated?   
 How will you tell other organisations about it?***

Provide details here

**BUDGET**

*Please provide a breakdown of the estimated project costs.   
Please note that the project sponsor must provide a reconciliation of actual costs with a project Report within 30 days of the completion of the project. NOTE that unspent funds will need to be returned to the CLSD Program Unit/Legal Aid NSW*

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| --- | --- |
| **ITEM** | **AMOUNT** |
|  |  |
|  |  |
| **SUB- TOTAL** |  |
| **GST** |  |
| **TOTAL** |  |

**Prepared by:**

Name: Provide details here

Agency: Provide details here

Date: Provide details here

**Submitted to**:

Title: Manager, CLSD Program

Date: Provide details here