ROTHERHAM MBC NEIGHBOURHOODS AND ADULT SERVICES

Rotherham's Wider-Workforce Skills Development Funding Application Scheme Milestone Claim Form 2013-2014

This form is designed to be completed electronically. Please e-mail nigel mitchell@rotherham.gov.uk if you would like a paper version of this form.

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SECT	TION 1) APPLICANT
1.1	Name of organisation, group, training provider
SECT	TION 2) LEARNING ACTIVITY
2.1	Learning Activity Title
SECT	TION 3) FINANCIAL SUMMARY
3.1	Claim for Period [1] [2] [3] or [4] -
3.2	Total amount of funding approved by the Council - £ £
3.3	Total amount of funding in this period's Milestone Plan - £
3.4	Amount of funding spent this period - £ £
3.5	Amount of funding being claimed this period - £

SECTION 4) MILESTONE PLAN

Learning Activity - Objecti	ves / Outputs	Milestones	Budget	Responsibility
have gained).	e), outputs (what i	as been delivered) and outcomes (what people who use services a	ia / or wider-workforce group
Costs incurred against bud	lget: Please list, a	nd total, the entire costs incurred by	the applicant and provide evide	nce (see - 6.5).
_	dget: Please list, ai	nd total, the entire costs incurred by	the applicant and provide evide	nce (see - 6.5).
Total £	£	nd total, the entire costs incurred by	the applicant and provide evide	nce (see - 6.5).
Total £ Trainer cost	£	nd total, the entire costs incurred by	the applicant and provide evide	nce (see - 6.5).
Total £ Trainer cost Venue costs Resources costs	£	nd total, the entire costs incurred by	the applicant and provide evide	nce (see - 6.5).
Total £ Trainer cost Venue costs Resources costs Transport costs	£ £ £	nd total, the entire costs incurred by	the applicant and provide evide	nce (see - 6.5).
Total £ Trainer cost Venue costs	£ £ £		the applicant and provide evide	nce (see - 6.5).

SECTION 5) DECLARATION

I confirm that all information included herein is accurate.

5.1	Name
5.2	Signed on behalf of provider / employer
5.3	Position
5.4	Contact e-mail address
5.5	Date of declaration

SECTION 6) COMPLETION AND RETURN OF THIS FORM

6.1	The Milestone Claim Form for Periods 1, 2 and 3 may be submitted immediately following the end of the period.
6.2	The Claim for final period must be submitted by Friday 17 th January 2014. This claim is aligned with the completion of the Quality Assurance Monitoring Form.
6.3	All claims to be submitted by e-mail to <u>directions@rotherham.gov.uk</u> <u>and</u> in hard copy to:
	Rotherham MBC Learning and Development Manager Neighbourhoods and Adult Services Directorate Riverside House Main Street ROTHERHAM S60 1AE
6.4	An invoice for the amount of money to be reclaimed should be submitted to directions@rotherham.gov.uk Note: This is expected to be no more than the budget.
6.5	Evidence of costs incurred must be submitted with the hard copy claim form and consist of copy receipts, invoices, etc.