



Schools Grant Application Form

Please read our FAQ's and Fine Print prior to completing this form.

1. School/community group applying for a grant:

2. Person responsible for running the proposed programme:

Full name: _____

Position: _____

Address: _____

Post Code: _____

E-mail: _____

Preferred contact phone number: _____

3. Details of production

(a) Name of Theatre or Touring Company?

(b) What Play? _____

(c) Proposed Date(s)? _____

4. Amount of funding requested: £_____

5. Is this a curriculum-related play? YES/NO (circle answer)

If yes, we will only fund tickets for Pupil Premium students.

NB: We do not want PP students singled out as getting discount tickets.

6. Pupil Premium Information

- a) What percent of Pupil Premium students does your school have? % _____
- b) How many students will be attending? _____
- c) How many of these are Pupil Premium students? _____

7. Proposed cost by major category, e.g. theatre ticket price, touring company cost, transport, etc. NB: Maximum grant £2,000.

Category	£

8. Is the theatre ticket cost a reduction on the theatre's normal charge?

YES/NO (circle answer)

NB: Please ask theatres for discounted student rates.

9. If yes, approx. how much does the theatre typically charge for student ticket?

10. Please provide the following information about the anticipated profile of children who will participate. This information will be used when we apply for grants.

Year Group (ages 7 – 16, key stages 2 – 4 eligible)

Percent male/female

Ethnic background of children (by %)

11. Where did you hear about theatre works! _____

12. Please confirm you have read the separate FAQ and The Fine Print section and meet all the requirements as outlined.

Signed _____

Dated _____

Please submit this form to: info@theatreworks.global