Appendix A: Expression of Interest Form

Birmingham Fairer Futures Fund

Locality Partnership Fund: **South Birmingham Locality**

Expression of Interest

About this form

This form should be used to submit an expression of interest for funding from the Fairer Future Fund Locality Partnership Fund grant. You must submit your expression of interest by 12pm midday on Sunday 20th July 2025 using this

Please use this form and e-mail the completed version to XXX with the subject line 'South Locality FFF EOI'.

The form is made up of three sections and allows you to provide information about your organisation(s) and the project for which you are seeking funding.

Section 1 - requires some basic contact information so that we can get in touch with you about your expression of interest.

Section 2 – this is where you should provide information on your organisation, and partner organisation(s) involved in the project. Partnership proposals are actively encouraged, which can be between VCFSE organisations, and/or with health, care, or education providers. Ideally, your partnership should include at least one non-VCFSE partner and involve some element of co-production or consultation with service users.

Please note that if you're applying for funding as a consortium of multiple organisations, one organisation should submit an expression of interest as the lead applicant; including details of partner organisations where requested.

Section 3 - in this section we ask you to give a brief description of the project for which you are seeking funding and how you believe it meets locality priorities (as included in additional information). Please refer to the guidance before completing this section. Please do not exceed the word limits for each question. Please note applicants that successfully submit EOIs will have the opportunity to refine the information included in their expression of interest, as part of final planning for delivery.

Section One – Contact Information

NB If you are making this application as the Lead Organisation on behalf of a partnership or consortia, please complete only your details below.

1.1 Contact Details

Organisation Name	
Address (registered)	
Postcode	
Date Established	
Contact Name	
Position in Organisation	
Telephone No	
Email	
Website Address	
Company Reg. No	
Charity No. (if applicable)	

1.2 Organisational Type/Status

Organisation Type	Tick	Registration Number (if applicable)
Unincorporated Association		
Registered Charity		
CIO (Charitable Incorporated Organisation		
CIC (Community Interest Company)		
NHS Provider		
Local Authority		
Other (please provide description)		

1.3 Organisational Information

If your Expression of Interest is successful, you will be required to provide finance and governance information for your organisation. Can you confirm you are able to provide the following as a minimum:

1.3.1 Financial Information. *Please provide **one** of the following to demonstrate your economic/financial standing:*

A copy of the audited accounts for the most recent two years	Tick
A statement of the turnover, profit & loss account, current liabilities and assets, and cash flow for the most recent year of trading for this organisation	
A statement of the cash flow forecast for the current year and a bank letter outlining the current cash and credit position	
Alternative means of demonstrating financial status if any of the above are not available (e.g. Forecast of turnover for the current year and a statement of funding provided by the owners and/or the bank, charity accruals accounts or an alternative means of demonstrating financial status).	

1.3.2 Governance Information. *Please confirm your organisation holds an up-to-date version of the following policies:*

Complaints Policy	Tick
Data Protection Policy	
Health and Safety Policy	
Safeguarding Policy (Adults and Children)	

Section Two – Partnership Information

If you are intending to deliver this project in partnership with other organisations, please include below the details of each of the partner organisation you will be working with. Please do not include the details of the Lead Partner (provided above in Section 1). Please provide registered company and/or charity numbers where applicable.

2.1 Partner Details

Name, address and contact information for each partner	Postcode	Registered charity or company number

2.2 Partnership Model

Please indicate whether you are:	
a) Bidding as a Project Lead and will deliver 100% of the project delivery yourself	Yes/No
b) Bidding as a Project Lead and will use partners to deliver <u>some</u> of the programme	Yes/No
c) Bidding as Project Lead but will operate as a Programme Manager and will use partners to deliver <u>all</u> of the programme	Yes/No

2.3 Please describe your approach to partnership working for this project. How will partners collaborate to co-design and deliver the project? (max 250 words).

2.4 Would you consider partnering with other organisations with similar proposals?

Yes/No (delete as appropriate)

2.5 Do you need support to make connections with possible partners?

 In the VCFSE Sector?

 In the health/care/statutory sector?

 I do not require support

Section Three – Your Proposal

3.1 The South Birmingham Locality Delivery Partnership (LDP) has identified a number of priority outcomes to help address health inequalities in the locality as detailed below (and in the additional information provided during the EOI process). Please tick below which of the priorities (please tick as many as applicable) your proposal aims to address

Priority Area	Tick
Mental Health and Wellbeing	
Healthy Ageing	
Respiratory Health	
Cardiovascular Health	

Please note, your project proposal should aim to address the specific priorities within the areas above as detailed in the additional information pack

3.2 What specific health or wellbeing inequalities (using the information from the pack) does your partnership project aim to address? (please provide evidence of why this is a priority and how you have identified the need for your project). (Max 300 words)

3.3 Please provide an outline summary of your project and what you plan to do. (Max 500 words). Please *detail your planned approach and what will be delivered including your anticipated outputs and outcomes including details of beneficiaries and how many people your work will impact (directly and indirectly).*

3.4 Measuring Success. How will you measure the impact of your project? What evaluation methods and measures will you use? (Max 500 words)

3.5 Timescales. Please state the full period over which your project will run (funding is available for projects up to 3 years). Please briefly detail the timeline for the project including key milestones and deliverables (Max 500 words)

Section Four – Finance

Please state the total amount of funding you wish to apply for in each year of your project (max 3 years) and indicate how this will be spent. Please include staffing costs, resources, operational costs and any management costs. Please indicate where funding will be distributed across the partnership organisations.

4.1 Outline Budget

Project costs: Year 1 (2025/2026)	**Cost**
Total Year 1 (2025/26)	**£**
Project costs: Year 2 (2026/2027)	**Cost**
Total Year 2 (2026/27)	**£**
Project costs: Year 3 (2027/2028)	**Cost**
Total Year 3 (2027/28)	**£**
Total Funding – All Years	**£**

Please return your completed Expression of Interest forms to XXX by Friday 9th May 2025 midday). If you have any questions or require any support with your EOI, please contact XXX in advance of the closing date