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**‘Supporting the Early Years’ - Parents Plus Early Years Programme roll-out 2019**

**Application form**

Please complete the form below making sure to fully answer all the questions.

*Please provide as much information as necessary in the boxes provided under each question. The boxes can expand to fit further text if this is required.*

Applications should be emailed as word documents to [eileen@parentsplus.ie](mailto:eileen@parentsplus.ie) and a hard copy with the appropriate signatures should be posted to Parents Plus, Mater Hospital, Eccles St., Dublin D07 AX57. Closing date **Monday, 4th March 2019**.

**Name of Person(s) Coordinating this Application**

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| Name:  Position:  Agency:  Address:  Email:  Phone: |

**Names of agencies within this application**

Specify a contact name for each agency, their position in the agency, as well as contact details.

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**Previous experience of the Parents Plus Programmes**

Please describe previous Parents Plus training and experience delivering the Parents Plus programmes within the applicant group. Please describe specifically the number of each Parents Plus Programme run, the year they were run, the context and the details of the facilitators.

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**Previous experience in delivery of other interventions with families, collaborations with other local agencies**

Please describe

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**Outcomes**

What outcomes are you interested in achieving for your target client group in participating in this project?

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How are you hoping it will make a difference to your community?

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Why does your service and practitioners want to participate in this project? Include some reflection on the practice development elements of the project.

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**Specifics of delivery**

Who will coordinate the project?

Who will be the facilitators?

Where and when will the groups be run?

How will you engage parents to attend?

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**Other Information**

Please include any other information in support of your application

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**Signatures**

Please include a senior manager as signatory from each agency in the application

We hereby support the application to the Parents Plus Charity for the ‘Supporting the Early Years’ - Parents Plus Early Years Programme roll-out.

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| 1. Name:   Position:  Agency:  Signature:  Date: | 1. Name:   Position:  Agency:  Signature:  Date: |
| 1. Name:   Position:  Agency:  Signature:  Date: | 1. Name:   Position:  Agency:  Signature:  Date: |