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Cairngorms National Park

Outdoor Learning Travel Grant Scheme 2013/14

Application Form

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| 1. **SCHOOL/ GROUP INFORMATION** | | | |
| School/ Group Name |  | | |
| Address |  | | |
|  | | |
|  | | |
| Post Code |  | Telephone Number |  |
| Contact email address |  | | |
| Teacher/Group Leader Name |  | | |
| Number of students /group members |  | Age of students / group members (approx) |  |
| Has your school/group visited the National Park before? | YesNo | If yes did they use a ranger service? | YesNo |

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| 1. **SITE INFORMATION AND TRAVEL COSTS** | | | | | |
| Location for activities | *see Guidelines for suggested sites*  *Include name of National Nature Reserve (if relevant*) | | | | |
| Ranger service or site staff | Is Ranger Service or other staff support being provided for your visit? | Yes  No | | Name of the ranger service / site staff you have been in contact with? |  |
| Proposed date of visit |  | | | | |
| Cost of transport, eg bus hire  (inc VAT) |  | | *Please provide us with estimated costs* | | |

If visit is not linked to the Curriculum, please skip to Section 4

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| 1. **CURRICULAR INFORMATION**   What activities will take place? | |
| Subject or Topic area to be studied (must have natural / cultural environment link) |  |
| Which particular areas of the Curriculum are you studying, linked to the visit? (Specific CfE contexts and content rather than just broad attainment outcomes) |  |
| What do you expect the students to learn from their visit to the National Park? |  |
| Would you be able to go on this trip without funding support? | Yes  No  Please comment |

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| 1. **NON-CURRICULUM LINKED VISITS** | |
| Please tell us more about your group / clients.  (see Applicants section in Guidelines) | *What is the make-up of your group?*  *What barriers or disadvantages does your group experience in accessing the National Park?* |
| Please give a general outline of your planned itinerary |  |
| What would you like your group to learn/benefit from their trip to the National Park? |  |
| Would you be able to go on this trip without funding support? | Yes  No  Please comment |

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| 1. **PAYMENT DETAILS**   Please provide your bank details for payments to be paid direct to your account | | | |
| Bank Sort Code |  | Account Number |  |
| Account Name |  |  |  |

**OR** if you would prefer to be reimbursed **by cheque**, please name the organisation to which the cheque should be made (please note we cannot make payment to individuals).

|  |  |
| --- | --- |
| Name of organisation |  |
| Postal address |  |

1. **SUBMITTING YOUR APPLICATION**

Please send your completed application form:

**By email** to: [learning@cairngorms.co.uk](mailto:learning@cairngorms.co.uk)

**By post** to: Elspeth Grant, Education & Inclusion Officer, CNPA, 14 The Square, Grantown-on-Spey, PH26 3HG

Confirmation of your application will normally be made by email.

Please remember you must apply for your grant and it must be agreed BEFORE your visit.