

**Subject Network Funding 2021-22**

**Introduction**

In 2021-22 funding for Subject Network activity will be held centrally by HEP and will be available to all networks.

**Conditions of Funding**

The funding should be used appropriately to meet the collective needs of the network. Some examples are provided in the table below. This is not an exhaustive list and is provided for illustrative purposes only.

The following conditions will apply to funding allocated to subject networks:

* No funding should be committed before a written proposal has been submitted and agreed by the SLTL representative and sent to HEP (Emma Pett: [e.pett@hounsloweducationpartnership.org.uk](mailto:e.pett@hounsloweducationpartnership.org.uk))
* Proposals for funded activity should be discussed by the network and agreements clearly minuted.
* The proposals should meet the following criteria.
  + A brief description of the ‘activity (ies)’ and what the funding will cover;
  + Which schools/partners will be involved;
  + A brief rationale for how the funding will enhance subject teaching and learning;
  + A brief outline as to how the impact will be evaluated and feedback into the network by participants;
  + When the activity will take place;
  + The estimated cost (budget).

(Where the proposal is made up of a number of elements then each element should address the criteria above)

|  |
| --- |
| ***Examples of Eligible Funded Activity (NB not an exhaustive list)*** |
| * Payment for a subject-related training session * Specialist expertise brought in to provide an update (e.g. update from an awarding body on qualifications/assessment) * Conferences |



**Subject Network proposal for funded activity 2021/22**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject Network** |  | | **Host School** |  | | | |
| ***Has this proposal been discussed/agreed/minuted by network members* Yes/No** | | | | | | | |
| **Funded Activity**  What are you proposing to fund?  (Please give details of the proposed activity and what the funding will cover) | | **Which schools are involved?** | **How will this activity support or improve the quality of teaching and learning?** | | **How will network members feedback/ evaluate the impact of the proposed activity?** | **When will the activity take place?** | **What is the estimated cost?** |
|  | |  |  | |  |  |  |
|  | |  |  | |  |  |  |
|  | |  |  | |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Submission by Network Lead (Name) |  | Date |  |
| SLTL Rep (Name) |  | Date |  |
| Approved by (HEP) |  | Date |  |