



APPENDIX G

EVENTS FUND 2015-2016

Evaluation Form

It is a condition of grant for **ALL** successful applicants that you must complete, sign and return this form to Arts and Events by the deadline that applies to your project. For grants of £500+, the final payment will only be released when we have the information requested on this form **and when we are confident that all the grant conditions have been fulfilled.**

Deadlines for complete Evaluation Forms and all supporting information to be received:

Event Date	Evaluation Deadline	Event Date	Evaluation Deadline
April 2015	30 th June 2015	October 2015	5 th January 2016
May 2015	31 st July 2015	November 2015	31 st January 2016
June 2015	31 st August 2015	December 2015	29 th February 2016
July 2015	30 th September 2015	January 2016	31 st March 2016
August 2015	31 st October 2015	February 2016	30 th April 2016
September 2015	30 th November 2015	March 2016	31 st May 2016

1) **Please include the following with this form:**

a) **A FULL BUDGET STATEMENT**

The statement should detail the entire budget – both income and expenditure. It should be for this project / event only and should not include other core activities of your organisation. It should reflect the projected income and expenditure submitted with your original application. Please use notes to explain any difference from the budget in your original application. Remember to include "in-kind" items and any ticket revenue in both income and expenditure.

b) Please enclose photographs from your event (either prints or digital photos 300dpi or above) with your evaluation form and budget along with declaration that you have written permission from the subjects for their usage by LB Tower Hamlets.

c) Please enclose any publicity or promotional material showing the Tower Hamlets council logo.

2) Insufficient information provided in this evaluation may result in a request for re-submission (provided that it is before the final deadline) or the final payment of grant being withheld.

3) We want to make sure that all of our services are delivered fairly and include everyone's needs. The information provided will help us to improve our services to you and others in Tower Hamlets. With up-to-date and accurate information we are able to better understand our service users / residents to meet their specific needs, identify any possible discrimination or barriers to accessing our services and work to remove them.

- 4) Tower Hamlets Council monitors the delivery of services to ensure that they are representative of all communities and that all service users are treated fairly. The information you provide on this questionnaire will remain strictly confidential, in accordance with the Data Protection Act 1998. Information will only be used by Tower Hamlets Council or other arms-length organisations in the Tower Hamlets Partnership.
- 5) When completing the question on disability, this can be a physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day to day activities.

If you would prefer an electronic version of this form, please email your request to:
festivalsandevents@towerhamlets.gov.uk



Evaluation Form for Events Fund

1 Event Details					
a	Name of Organisation				
b	Title of event/project:				
c	When did the event/project take place? Give date/s and times (include any reasons for changes from your original application).				
2 Access					
a	How many people were involved in, or benefited from, your project?				
	As participants				
	As audience				
	As artists				
	As managers/organisers				
b	From what ethnic group were the people who benefited from the project (please give a percentage of each category that applies). You may need to estimate this, please indicate if Actual or Estimated.				
	White				
	British		Irish		Traveller of Irish Heritage
	Turkish / Turkish Cypriot		Greek / Greek Cypriot		Gypsy / Roma
	European		other		NOT KNOWN
	Asian				
	Asian British		Bangladeshi		other
	Indian		Pakistani		Mixed / Dual Heritage
	Chinese		Vietnamese		NOT KNOWN
	Black				
	Caribbean		African		Black British
	Somali		Mixed / Dual Heritage		Other
	Latin American		Any other ethnic group		NOT KNOWN

c	Please indicate what percentage of your audience / participants had a disability:						
	Alzheimer's		Dementia		Deaf or Partially Deaf		
	Blind or partially sighted		Physical Disability		Learning Disability		
	NOT KNOWN						
d	Gender: Please indicate what percentage of your audience / participants were:						
	Women		Men		Transgender		
e	Age: Please indicate what percentage of your audience / participants were aged:						
	0-4		5-9		10 – 14		15 – 19
	20 – 24		25 – 29		30 – 34		35 – 39
	40 – 44		45 – 49		50 – 54		55 – 59
	60 – 64		65+		NOT KNOWN		
f	Religion Please indicate what percentage of your audience / participants were:						
	Agnostic		had no religion				
	Christian		Jewish				
	Muslim		Buddhist				
	Sikh		Hindu				
	Humanist		another religion (please specify)				
	NOT KNOWN						
g	Sexual Orientation						
	Heterosexual		Lesbian				
	Gay		Bisexual				
	NOT KNOWN						
h	Pregnancy and Maternity						
	Pregnant		Breastfeeding				
	NOT KNOWN						

i	Relationship Status Please tell us the percentage of people who were:		
	Civil Partnerships		Married
	Single		Co-habiting
	NOT KNOWN		Divorced
3	Your Event	Refer to question 3 in your application	
a	How did the project allow the audience and or/participants to experience a creative and high quality event? Please give examples and evidence.		
b	How did the project meet the priorities that you identified in your original application? Please give examples and evidence.		
C	How did the project enable you to reach the particular groups that you identified in your original application? Please give examples and evidence.		
4	Marketing	Please refer to question 3f in your application	
a	Explain whether your marketing plans were successful. Give examples. Attach copies of all relevant PR material – it is a condition of grant that the Tower Hamlets logo is used on all relevant publicity and promotional material.		

b	How were you able to attract new audiences / participants. Give examples.																		
5	Outcomes Please refer to outcomes you stated in question 5 in your application																		
a	Did you achieve your intended outcomes? Please give evidence / examples:																		
	<table border="1"> <thead> <tr> <th></th> <th>Activity / output / outcome description</th> <th>Evidence</th> </tr> </thead> <tbody> <tr> <td>1</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td></td> <td></td> </tr> <tr> <td>4</td> <td></td> <td></td> </tr> <tr> <td>5</td> <td></td> <td></td> </tr> </tbody> </table>		Activity / output / outcome description	Evidence	1			2			3			4			5		
	Activity / output / outcome description	Evidence																	
1																			
2																			
3																			
4																			
5																			
b	How has this project helped strengthen, develop or change your organisation or its activities? Please give evidence / examples:																		
c	Do you intend to repeat and/or develop this project in the future? Please explain:																		

Budget Spreadsheet To Accompany Evaluation Form.

Please put all costs and income including ticket income and all contributions both cash and in kind and clearly state who has provided the financial support.

This budget should include the sources of income and expenditure given on your original application form with the actual amounts.

6 ACTUAL Income (Total for the event)			
Source of income Please give name of source or sponsor	Amount Total cash and in kind	Cash	In Kind
Amount you received from the Events Fund: (Please put full award amount even if you are awaiting the second payment)			
TOTAL:	£		

7 ACTUAL Expenditure				
Give details of the TOTAL expenditure reflecting your original application budget.				
Details		Cash	In Kind	Total Expenditure £
Staff:				
Administration:				
Equipment and materials:				
Infrastructure: e.g. stages, marquees				
Services: e.g. stewarding, medical.				
Artists fees / entertainment:				
Marketing:				
Licensing/ Health & Safety: MANDATORY				
Insurance: MANDATORY				
Monitoring and evaluation: MANDATORY				
Other – please list:				
TOTAL: This should be the same as your total income.				

8	Checklist (please tick box)
Completed evaluation form (all sections) <input type="checkbox"/>	
Full budget statement – both income and expenditure with notes if applicable <input type="checkbox"/>	
Photographs from your event, 300 dpi or above, either digital or prints (optional) I declare that I have obtained signed consent for use of the photos attached: <input type="checkbox"/>	
Any publicity or promotional material showing use of Tower Hamlets logo <input type="checkbox"/>	
Copy of Public Liability Insurance <input type="checkbox"/>	
9	Declaration
I confirm to the best of my knowledge that the information provided and the assessments made on this form as well as the attached budget statement are true and accurate. We have complied with the standard and special conditions attached to the grant and request payment of the final instalment.	
Name:	
Signature:	
Position:	
Date:	

Please return your completed form to:

Events Fund Administrator
 LBTH Arts & Events
 Brady Arts Centre
 192-196 Hanbury Street
 London E1 5HU

email: festivalsandevents@towerhamlets.gov.uk