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| --- |
| Proposer Details |
| First Name |  |
| Surname |  |
| P Number |  |
| Email Address |  |
| Telephone Number |  |
| *Faculty/Course* |  |
| *Module/Course Leader Name* |  |

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| *Project Details* |
| Title of Project |  |
| Is this a group project?* If yes, please name your group
* Please give names of the other group members and P Numbers
 |  |
| Is this a required part of your course? |  |
| Brief description of project* Please include what support you would require from DMU Local
 |  |
| Are you working with any other organisations for this project? If so please state them. |  |
| Project Type (Single Event, Ongoing Project, Research etc.) |  |
| Proposed start date |  |
| Proposed completion date |  |
| How will your project be funded? * Please include the estimated total costs of the project, and where this funding is coming from.
 |   |
| Are there any potential risks to this project delivery? |  |
| Does this project align to a UN SDG goal? If so, which one?  |  |

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| Community Impact |
| Which area of Leicester will be impacted (if known)? |  |
| Does your project target a specific community group? * If yes, please provide further details.
 |  |
| What challenge / issue / problem does this project assist with changing, in the target market? |  |
| What would make this project a success?* How will you measure this?
 |  |

\*Please note that this is not a mandatory form to complete.