James Rao

Live Your Dream Foundation

[www.jamesraodream.com](http://www.jamesraodream.com)

Final Application

**Deadline 25/11/2022**

Name :

|  |
| --- |
| **Final Proposal Form** |
| **Dates of Proposed Visit:**  |

Congratulations on having your initial proposal form accepted by the Foundation. You are one step closer to realising your dream trip. The next few pages will help you to focus your ideas and make sense of the amount of planning and preparation that goes into making your adventure a reality. We would like to know why this is your dream.

|  |
| --- |
| **Step 1 – The Bigger Picture** |
| Please explain in the space below the initiative in which you will participating (e.g. conservation of endangered species, school building project) and why you chose this type of work.  |

|  |
| --- |
| **Step 2 – The Organisation** |
| Name of Organisation |  |
| Web site |  |
| Postal address of organisation |  |
| Contact Phone Number |  |
| Email Contact |  |
| Contact person  |  |
| Total Cost of visit | € |
| What is not included in the cost above?  |  |
| Group or individual visitOnly one application is needed for a group. If group, please list all members here.  |  |
| **Step 3 – The Project** |
| What are the aims of the project and in what way will it have a positive impact on the community?  What will you bring to this project? What will this project do for you?  |

|  |
| --- |
| **Step 4 – The Location** |
| Please explain in the space below what you know about the location of your project.  |

|  |
| --- |
| **Step 5 – Assessing the Risk** |
| Now that you have a contact at your chosen organisation, you need to speak to them about the risks involved in your trip. You may be going to a country that is vastly different to France and so you need to understand the risks associated with that country. The organisation will have carried out extensive risk assessments and these should be made available to you. Please complete the table below with as much details as possible.  |
| **Details of Risk** | **Details of how that risk is managed** |
| **Risk to your personal health** (e.g. tropical diseases such as malaria, access to clean water, ***current COVID-19 situation, pre-departure testing etc***.) |  |
| **Risk as a result of climate**(e.g. heat, cold, humidity) |  |
| **Risk as a result of travelling**(e.g. quality of transportation, safety devices)  |  |
| **Risk due to political instability**(e.g. conflicts in the local area, history of conflict) |  |
| I have checked to ensure that the organisation is reputable and has the relevant insurance policy certification and indemnities. (please delete as applicable)**Yes****No** |
| **Step 6 – Nationality & Security** |
| Please provide evidence that you have checked with your Foreign Office / Embassy and French Foreign Office travel advice and that the country you will be visiting is on the safe list and that there **are no COVID-19 restrictions in place**. You must be able to purchase insurance for your trip.  |

|  |
| --- |
| **Step 7 – Visa Requirements** |
| Please detail any visa requirements including costs and timescales. Your passport must be valid for at least 6 months from the date of your arrival in the country. Some countries require at least 12 months before expiry.   |

|  |
| --- |
| **Step 8 – Getting There & Back** |
| Please detail underneath the proposed transport involved in getting to your destination. This should include all connecting flights and other modes of transport. Please include an invoice or quote for all transportation. If the transport is included in the total cost of the organised trip, please just complete the first three columns of information.  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Mode of transport** | **From** | **To** | **Cost in €** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| How long in advance does your transportation need to be paid for and is the cost likely to change?  |

|  |
| --- |
| **Step 9 – Injections & Medication** |
| Please confirm that you have sought medical advice about the proposed visit and any medication that may be required (Yellow Fever Jabs, anti-malaria medicine etc). You agree to accept full responsibility for seeking appropriate treatment should you be successful in your application.   |

|  |
| --- |
| **Step 10 – Sharing Your Dream** |
| If you application is successful, we would like to have a permanent record of your adventure so that future applicants can better understand what the Foundation is about. Outline beneath how you would go about recording your adventure. Remember that internet access is limited in many parts of the world.  You must agree to your adventure details eventually being published on the Foundation website <http://www.jamesraodream.com/my-visit.html> so that we can keep a permanent record of how James’s fund is being used to positively affect the lives of others in different parts of the world. You must also agree, if called upon, to be part of the selection process for the 2023-24 academic year award as well as helping out with the next launch assembly and promoting the work of the Foundation within the IST community (students, teachers, parents, local area) upon your return |

|  |
| --- |
| **Step 11 – Reference**Please choose somebody to complete a reference for you in the space below. This reference **must not be** completed by a member of your family, friends, or a schoolteacher at IST. They should write no more than 250 words to describe why you should be considered for funding from the Foundation. This reference can be completed in either English, Spanish, French or German.  |
|  |

|  |
| --- |
| **Total Costing Breakdown** |
| **Accommodation**  | € |
| **Transportation** | € |
| **Subsistence**  | € |
| **Other – please provide full details below** | € |
| **Is a deposit required & if so for when?**  | € due before |
| **What is the final balance & when is it due?**  | € due before  |
| **Grand Total €** |
| **Declaration**We, the undersigned, request funding to the value of €\_\_\_\_\_\_\_ from the James Rao – Live Your Dream FoundationWe declare that the information contained on this application is, to the best of our knowledge correct and that we have included all invoice costs to support this final amount. We acknowledge that this trip is organised completely independently of the International School of Toulouse and is not a school trip. We understand the risks associated with travel to foreign countries, COVID-19 and remote locations. We have minimised this risk by organising comprehensive insurance and checking the reputability of the chosen organisation carefully. Signed (student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed (parent) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Group Application \*\*Only\*\* – Continue Beneath**Signed (student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed (parent) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed (student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed (parent) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed (student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed (parent) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Feedback from Foundation Trustees** |
|  |

|  |
| --- |
| **Accepted to Interview (Y/N)**  |
|  |

Signed:

Date: