



**Bray & North Wicklow
Area Partnership**

Website: www.bnwap.ie

**SOCIAL INCLUSION COMMUNITY ACTIVATION PROGRAMME
(SICAP) 2024 - 2028**

EXPRESSION OF INTEREST FORM

to Bray & North Wicklow Area Partnership (BNWAP) for inclusion on the panel with respect to potential subcontracting arrangements for the provision of specified SICAP supports and services to eligible target groups in the Bray South area in 2026.

December 2025

The Expression of Interest Form, fully completed, in hard copy format, to be returned to Bray & North Wicklow Area Partnership, the Boulevard, Quinsborough Road, Bray, Co. Wicklow or in electronic format to chairperson@bnwap.ie quoting SICAP Expression of Interest Form, no later than 5pm Monday 15th December 2025. Late submissions will not be considered. This call for submissions of interest does not oblige BNWAP to enter into subcontracting arrangements with any organisation.

SECTION 1 APPLICANT DETAILS

1.1	Legal name of organisation (as registered with the CRO or otherwise)			
1.2	Business or trading name if different from the above			
1.3	When was the organisation established			
1.4	Legal form of the organisation	Type of organisation	Please ✓	
		Company Limited by Guarantee not having a Share Capital		
		Friendly/Industrial Provident Society		
		Other form, please specify		
1.5	Financial overview of the organisation (audited accounts to be submitted for 2024.			
		Income	Amount	
		2024	2025	
		Public Funds (revenue)	€	€
		Public Funds (capital)	€	€
		Income from service provision	€	€
		Donation & fundraising	€	€
		Other		
		TOTAL	€	€
		Expenditure	Amount	
		2024	2025	
		Salaries/wages	€	€
		Overheads/utilities	€	€
		Programme costs	€	€
		Administration	€	€

		Other	€	€
		TOTAL	€	€

1.6	Information on public funding received by the organisation from Government Depts. and state agencies or related bodies	<table border="1"> <thead> <tr> <th rowspan="2">Dept. & Related Programme</th> <th colspan="2">Amount</th> </tr> <tr> <th>2024</th> <th>2025</th> </tr> </thead> <tbody> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> <tr><td></td><td>€</td><td>€</td></tr> </tbody> </table>			Dept. & Related Programme	Amount		2024	2025		€	€		€	€		€	€		€	€		€	€		€	€		€	€		€	€		€	€		€	€		€	€
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1.7	CRO Number																																									
1.8	CHY number																																									
1.9	WEB Site Address																																									
1.10	Outline the purpose of the organisation																																									
1.11	List the facilities and resources available to the organisation including staff, buildings, learning & development programmes and other related facilities																																									

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SECTION 2 DETAILS OF SUPPORT & SERVICE PROVISION

2.1	Provide details of the type of supports and services delivered by the organisation. This should include the purpose of the supports and services delivered and target groups engaged	
2.2	Outline any previous experience or involvement with work associated with SICAP	
2.3	Set out the achievements of the organisation including quantitative and qualitative data related to the work/activities undertaken	

2.4	List any collaborations involved in the work undertaken by the organisation	
2.5	Outline the type of supports and services that the organisation would intend to provide to eligible target groups through SICAP funded subcontracting arrangements	
2.6	List the set of resources that will be made available in delivering such supports and services including staffing; buildings, programmes and other facilities	
2.7	Set out the expected outputs and outcomes to be achieved through the proposed work to be undertaken and	

	how this will be recorded	
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Section 3 SUBMISSION OF EXPRESSION OF INTEREST

By submitting this Expression of Interest Form to BNWAP for inclusion on the panel with respect to potential subcontracting arrangements for the provision of specified SICAP supports and services to eligible target groups in the Bray South area the organisation declares that the information provided is true and complete to the best of its knowledge and belief.

In addition, the organisation is aware that by submitting this Expression of Interest Form no commitment is enacted between the organisation and BNWAP or indicates an agreement for any subcontracting arrangements.

Information contained in this application form may be released, on request, to third parties in accordance with BNWAP's obligations under the Freedom of Information acts 2014.

By submitting this Expression of Interest Application form the organisation acknowledges that it has read, understood and accepted the information listed above.

Board member/Director	Signature:
Authorised staff member	Signature

Organisation Contact Persons		
Primary Contact Information Person nominated for contact purposes concerning the application.	Name of contact person	
	Job title/role in organisation	
	Telephone number	
	E-mail address	
Primary Contact Information Person nominated for contact purposes concerning the application.	Name of contact person	
	Job title/role in organisation	
	Telephone number	
	E-mail address	
Organisation Address	Line 1	
	Line 2	
	Line 3	
	County	
	Eirecode	

