

GRANT FOR ASSISTANCE APPLICATION CENTRAL CARIBOO and CARIBOO CHILCOTIN Electoral Areas D, E, F, J AND K

On an annual basis, Electoral Areas D, E, F, J and K of the Cariboo Regional District (CRD) jointly provide Grants For Assistance to local non-profit organizations for projects, activities and events that strengthen and enhance the wellbeing of the community, promote volunteerism and support the goals and priorities of the Cariboo Regional District.

Applications may be submitted to the Cariboo Regional District via mail or by hand at Suite D, 180 North Third Ave., Williams Lake, BC V2G 2A4; facsimile at 250-392-2812; or email at mailbox@cariboord.ca

THE DEADLINE FOR APPLICATIONS IS SEPTEMBER 30TH

Late applications will not be considered.

In order to qualify for a Grant For Assistance, the applicant must:

- Provide the most recent Annual General Meeting report, financial statements and approved budget for the current year;
- Demonstrate financial need; and
- Provide a service, project or event that supports the priorities and goals of the CRD.

Services, projects or events proposed by the applicant must not:

- Offer direct financial assistance to individuals or families;
- Duplicate or replace services that fall within the mandate of senior levels of government or local service agency; or
- Support a Provincial or National fundraising campaign; or
- Be of a commercial nature

Grants for Assistance will be provided under the following categories:

- 1. Capital Expenditure equipment purchase, construction, repair or upgrade of facilities
- 2. **Event** seed funding for new, ongoing events with diminishing support over three years
- 3. **Special Project** one-time special event, program or activity



Grant for Assistance Application – Central Cariboo

Organization Information Sheet

Name of Organization:
Mailing Address:
Telephone (office): email:
Purpose of Organization (From Constitution or Incorporation Documents):
How long has the organization operated in the community?
BC Society Registration Number:
Federal Charitable Registration Number: (if applicable)
Chairperson's name:
Telephone: email:
Treasurer or Financial Officer's name:
Telephone: email:
Date of last Annual General Meeting (Attach minutes and current list of Directors):
Attach the last financial statement prepared and signed by the appropriate person (i.e., CA, CGA, CMA, comptroller, bookkeeper, financial officer, treasurer, etc.).
Previous Year Grant from CRD (if applicable) \$NOTE: A Final Report for previous year's grant MUST be included with this submission, if not previously submitted.
Current Grant Requested from CRD \$



Grant for Assistance Application – Central Cariboo

Ple	Please answer the following questions, using additional paper if necessary.		
1.	What plans has your organization made to fund its activities over the next 3-5 years?		
2.	If your organization charges user fees/memberships/admission, attach your current fee structure:		
3.	What are your organization's specific goals and objectives for this year? How do they differ from previous years?		
4.	Who does your organization serve?		
5.	Does your organization receive a rental subsidy from the City and/or CRD? If so, how much?		
6.	Does your organization receive any benefit from permissive tax exemption, and if so, how much? (information available from City Tax Department)		
7.	Does your organization use City or CRD owned facilities? If so, which ones?		
8.	How will you indicate that the CRD is contributing to your organization?		



Grant for Assistance Application – Central Cariboo Project Summary Sheet Please answer the following questions, using additional paper if necessary. Brief Description of Proposed Use of Grant Being Applied For: 2. How do you know there is a need for this service/project in our community? 3. Is your agency applying for funds from other levels of government or other sources for this project? 4. Would you still be able to complete the project if you do not receive the other funds applied for? 5. Please describe the impact of this application being denied or approval of an amount less than requested.



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6.	Start date of the project:
	End date for the project:
7.	Please describe the key activities that will take place to complete the project and any associated timelines.
8.	Please provide a <u>detailed</u> financial budget for the project.
9.	Please explain how you will measure and evaluate the impact of this project on the community? How will you determine if it was successful?
	E INFORMATION INCLUDED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF KNOWLEDGE.
Pre	esident/Chairperson