



Grant Application Form

PLEASE ENSURE YOU REVIEW ALL GUIDELINES AND EVALUATION CRITERIA BEFORE COMPLETING THE APPLICATION

SECTION 1: APPLICANT CONTACT INFORMATION

Organization Name: _____

Canada Revenue Charitable Registration No.: _____ Corp. No.: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____

Website: _____

E-mail: _____

Primary Contact for this Application: _____

Position: _____

Contact Phone: _____

Contact E-mail: _____

SECTION 2 ABOUT YOUR ORGANIZATION

Briefly describe your organization's activities include your organizations mission, goals and mandate in Powell River and the population it serves. If your local organization is part of a larger organization, describe the overall structure. Provide the date (month and year) that your organization was started in Powell River:

Provide your organization's staffing level for Powell River (include full-time, part-time, contractors and regular volunteers):

Has your organization receive any grants from the Powell River Community Foundation in prior years? Yes No

If yes, provide: Project Name / Amount / Year

SECTION 3 ABOUT YOUR PROJECT

Project Title: _____

Project Start Date (yyyy/mm/dd): _____

Project Completion Date (yyyy/mm/dd): _____

Provide a brief summary of your project:

List all of the Powell River Community Foundation's fields of interest that apply to your application (*See Application Guidelines*). For each field listed, identify the specific needs your project undertakes to address:

Describe the project activities and include a time line, if applicable:

Specify the particular segments of the community that will benefit from your project, how they will benefit and whether the project will benefit the Powell River community as a whole:

If volunteers are required to carry out the project, specify how they will be used, how many volunteer hours are needed and the plan for recruitment:

If other organizations or groups are collaborating on this project, identify them and describe their specific roles:

If specialized skills are required to carry out the project, identify the skills and who will provide them:

Specify the project's objectives and intended outcomes:

Describe how you plan to monitor the progress of your project and evaluate its success in achieving your objectives:

If PRCF awards a grant for less than the requested amount, describe how your organization will complete the project:

If the project is expected to continue for more than one year, explain the how the project will be financed and the sources of revenue for future years:

If there are contingencies or factors that may affect the ability of your organization to carry out or complete the project, provide an explanation:

Provide the name, e-mail and telephone numbers of three persons not directly associated with the project, who may be consulted for information regarding this project and your organization:

SECTION 4 DETAILED PROJECT BUDGET

Please refer to the Funding Restrictions section of the Application Guidelines for information on expenses the Powell River Community Foundation does not typically fund.

EXPENSES *(Do not list in-kind items here)*

Item Description	Cost	Amount Requested from PRCF
Salaries/Wages/Benefits		
Professional Fees/honoraria		
Rent and Utilities		
Telephone and Internet		
Printing/Photocopying		
Postage and Delivery		
Office Supplies		
Publicity/Promotion		
List Expenses:		
List Expenses:		
List Expenses:		
List Expenses:		
List Expenses:		
List Expenses:		
List Expenses:		
List Expenses:		
List Expenses:		
TOTAL EXPENSES		

REVENUE

Source	Description	Assured	Potential	Total
PR Community Foundation				
Other Grant (Specify Source)				
Other Grant (Specify Source)				
Other Grant (Specify Source)				
Other Grant (Specify Source)				
Government (Specify Source)				
Government (Specify Source)				
Government (Specify Source)				
Fundraising				
Sales of Items or Services				
Organization's Contribution				
Other (Specify)				

TOTAL REVENUE

Note: Total Revenue and Total Expenses must match.

VOLUNTEER AND IN-KIND

Item	Source	Value
Volunteer Labour		
List Item:		
List Item:		
List Item:		
List Item:		
List Item:		

TOTAL VOLUNTEER & IN-KIND

SECTION 5 REQUIRED ATTACHMENTS

Attach a list of your organization's current board of directors and executive positions.

Attach your organization's most recent year-end financial statement.

SECTION 6 AUTHORIZATION

By signing this application below, I do solemnly declare:

(a) that, to the best of my knowledge, the information given in this application is complete and true in every respect and,

(b) that this application has been approved by the governing body of the applicant organization:

Both signatures are required.

Signature of person preparing form

Name: _____

Date signed: _____

Signature of applicant's Chair or President

Name: _____

Date signed _____

IMPORTANT: The application **must** be signed. For e-mail submissions, this page should be printed and then scanned or photographed.

CHECKLIST

A complete application has:

- This application form with all items completed
- An attached list of current board of directors and executive positions
- The organization's most recent year-end financial statements
- The signature of the organization's president and the person submitting the application

APPLICATION SUBMISSION

This application can be sent only by regular mail or by e-mail and must be *received* on or before the deadline.

Submit by email to: prcf@firstcu.ca

Submit by regular mail to: Powell River Community Foundation

PO Box 335

Powell River, BC V8A 5C2

Thank you!