

Vanderhoof Community Foundation

Box 1711

Vanderhoof, BC

V0J3A0 legacy@vhfcf.org

250-567-4805 legacy@vhfcf.org

 **GRANT APPLICATION FORM**

Please refer to the Grant Guidelines prior to completing this application.

**Note to prior Grant Applicants:** Grant applications will not be reviewed for applicants with overdue Grant Final Reports nor for applicants who do not show proof of recognition to the Vanderhoof Community Foundation.

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| **Name of organization:** |
| **\* Your CRA Charitable Registration Number:** |
| All applicants must be a Canada Revenue Agency (CRA) Registered Charity or QualifiedDonee, or partner with one of these organizations that can receive the funds on your behalf. If you don’t have a partnership, you may apply and the Vanderhoof Community Foundation may be able to assist you with this arrangement.  |
| **Name your organization officers:** |
| **Mailing address:** | **Website and/or Social Media Handles:** |
| **Contact name:** |
| **Email:** | **Phone:** |
| **Geographic Area:** Eligible Applicants must be operating in or provide services to the Vanderhoof area including any one or all of Vanderhoof, Saik’uz, Cluculz Lake and Regional District of Bulkley Nechako Rural Area F. The proposed project must also focus on this area.**Please explain how your organization and your proposed project meet this criteria:** |
| **Briefly describe your organization’s Mission or Mandate:** |
| **Briefly describe your project including why this project is a priority for your organization.** |
| **Project focus area:** Which of the following does your proposed project encompass? Arts and Culture; Education; Health; Social Development; Sports and Recreation; Environment. |
| **Project Duration: Provide Start date and End date as well as Milestone dates and activities toward project completion. \* Project may not start prior to grant being awarded.** |
| **Who does the project target or benefit and what is the intended impact on your target group and/or the community as a whole?** |
| **Has your organization carried out grant aided projects in the last 3 years? Please describe briefly.** |
| **# of persons directly affected by the Project:****# of persons indirectly affected by Project:** |
| **Amount Requested from the Foundation:** |
| **What will the Foundation grant funds specifically be used for?** |
| **Project Budget** **List of Expenditures** |
| **Total Expenditure: \*Expenses incurred prior to project approval will not be eligible.** |
| **Funding Sources and Amounts – indicate if confirmed or pending.**  |
| **Please describe how your organization will ensure that the project is completed on time and on budget?**  |
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| **\*In-kind contributions may include contributions of services, materials, or equipment but are not generally considered to include volunteer labour unless provided by a third party organization.** |
| **Will your project be able to proceed if only partial funding is received? If so, where do you anticipate the remaining funds will come from or how will you adjust your project to match funds received?** |
| **How will you know if your project is successful? Provide clear, measurable outcomes. How will your project strengthen or improve the community? How will you make use of the skills and resources that exist in the community?** |
| **What information, anecdotes, statistics etc. are you collecting from the beginning of the project which you will be able to share in your Project Report?** |
| **How will the grant from Vanderhoof Community Foundation be recognized?** |

**Authorized signature of Applicant Organization:**

 **Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position in Donee Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Questions can be sent to the Vanderhoof Community Foundation at: 250-567-4805