

Application for Municipal Grant Program

1. General Information of the Society or Charity (Organization)

Organization Legal Name:		Registration Number:
Mailing Address:	City and Province:	Postal Code:
Primary Contact Person Name:		Primary Contact Person Position:
Primary Contact Person Phone Number:		Primary Contact Person Email Address:

2. Organization

BC Registered Non-Profit Society for 1 Year		CRA Registered Charity for 1 year
Provided services for 1 Year	Established Board	Financial Need
Applied of Other Funding	Utilizes Volunteers	Fulfilled Final Reporting Requirements

3. Brief description of the organization

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4. Initiative

Community Service	Community Activity	Special Event
New Project	Community Program	Arts & Cultural Initiative
DEI Initiative	Accessibility Initiative	Organization Operating Costs
Workshop/Conference/ Seminar	Training & Development	Other

5. Brief description of the initiative

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6. Brief description of the importance and benefit to the community

7. Estimated number of people directly benefitting _____.

8. Outline what the grant funds will be used for

9. Grant amount requested: \$ _____.

10. List existing partnerships, collaboration, and engagements with other local organizations

Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:

11. List all additional sources of funding received or applied for (including in-kind contributions)

Name:	Amount: \$	Status:
Name:	Amount: \$	Status:
Name:	Amount: \$	Status:
Name:	Amount: \$	Status:
Name:	Amount: \$	Status:
Name:	Amount: \$	Status:
Name:	Amount: \$	Status:

12. Required Attachments

Provide an attached detailed summary and work plan for the initiative.

Provide an attached current operating budget and prior year financial statements.

Detailed Summary and Work Plan	Current Operating Budget	Prior years Financial Statements
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Declaration:

I am an authorized signing officer of this organization and I certify that the information given in this application is correct and endorsed by the organization that I represent. Should a grant be approved, I agree that it will be used in the manner that it was applied for.

Signature _____

Date _____

IMPORTANT INFORMATION

- Refer to Municipal Grant Program Policy and Procedure No. 40-51 for detailed information.
- Deadline for submissions is September 1st.
- Late submissions will not be accepted.
- Incomplete submissions will not be accepted.
- Applications will be presented to City Council for review during next year's budget deliberations.
- Notification of successful applications will be provided after budget is adopted.
- Organizations receiving a grant from the City of Cranbrook will be required to provide a final report in the prescribed form. Failure to provide a final report will negatively affect your chance for future grants.
- Applicants carrying accumulated surpluses/reserves must clearly explain their intended use of these funds.
- Financial statements and operating budgets must be attached to your application.
- Please provide as much detail as possible. This will assist City Council in making an accurate and responsible assessment of your needs. Please include any additional information you feel is relevant.

Online Applications will be automatically submitted through the City Website.

Please return completed application to: City of Cranbrook
40-10th Avenue South, Cranbrook, BC V1C 2M8
or email: Melissa.Willman@cranbrook.ca

Personal information contained on this form is collected under the *Community Charter* and in accordance with the *Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of processing the application.

Office Use Only	Documents Received	Date Received:	Staff Person:
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