



GRANT APPLICATION PROCESS

(Edited January 2012)

Mission Statement

Improving the quality of life for the people of Southeastern Alberta through developing permanent endowments, making responsible grants, and inspiring community leadership.

Information for Grantseekers

Basic Criteria

Grant Guidelines – Who Should Apply

Applications are only accepted from qualified donees or organizations holding a **Charitable Registration Number** from Canada Revenue Agency effective *before* applying for the grant. The number has the following format: BN 13603 0285 RR0001 (this is the Community Foundation number). **It is the number you receive when you achieve charitable status and which allows you to write official tax receipts.** If the number on your tax receipts is not in this format, look for the correct number at <http://www.cra-arc.gc.ca/chrts-gvng/lstngs/menu-eng.html> and search for online list of Canadian Registered Charities.

ENSURE THAT YOU HAVE A CURRENT GRANT APPLICATION PACKAGE – they are revised on a regular basis. Applications submitted on old forms will NOT be accepted.

When to Apply

Grants are made twice yearly. Proposal **deadlines** are office closing (4:30 p.m.) **March 15th** for grants finalized in spring, and **September 15th** for those finalized in fall. Applications must be at the Community Foundation office by the designated deadline time. Unfortunately late applications can not be accepted.

Normally, grants will be finalized two to three months after the proposal deadlines. Your agency will be notified as to its status at that time.

What We Fund

The Community Foundation awards grants for charitable activities in the arts, education, social services, the environment, health, culture and recreation, or any project that will maintain or improve the quality of life for the people of southeastern Alberta. Of particular interest are initiatives which will strengthen an organization's management capability and promote collaboration and sharing among agencies.

In assessing requests, the Foundation looks at organizations that show fiscal responsibility, have a committed volunteer board, represent the community they service and have the capacity to carry out the work. Applicants must demonstrate how their initiative will benefit the community and how the project will be funded beyond the grant from the Community Foundation. Requests for multiple year funding, up to three years, will be considered to develop or implement strategic initiatives. **The Community Foundation does not provide ongoing funding.**

What We Don't Fund

Grants will not be available for partisan political purposes or direct religious activities. Grants will *not normally* be given for deficit funding, annual funding drives, travel and conferences, endowments grants, retroactive funding, large capital campaigns, or for any related expenses incurred prior to the Foundation's decision date.

Final Reporting and Recognition

- A formal *Grant Agreement* will be signed by each successful applicant.
- There is an expectation that successful applicants will provide appropriate public recognition to the Foundation.
- Successful candidates are expected to provide a representative to attend the grants award ceremony in person.
- A *Final Report* is required from all successful applicants **no later than the date** specified on the *Grant Agreement*. Late or incomplete final reports can affect future grants.

Grant Awards Are Final

Application Details

Page 3 – Agency Information – must be submitted “As Is”. Do not retype or reformat.

Page 5 – Project Budget – may be elaborated upon if necessary, but should still use only one page. The budget MUST record other possible funding sources for the project and whether funding from those sources is confirmed at the time of the application to the Community Foundation. The budget must also indicate how much funding the agency itself will be making toward the project and how these funds will be raised.

Questions 1-10 - Information must be documented only in the space provided for each question. You may type over the questions. We encourage grant applicants to optimize the amount of information on the grant application by answering the questions in point form.

If your grant application includes a request for funding office furniture, computers, electronic equipment and/or related training, or other CAPITAL items, please include 2 cost quotations.

- **BE SURE TO ENCLOSE EVERYTHING ON THE CHECKLIST.**
- **INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED.**
- **MATERIAL OTHER THAN THAT WHICH HAS BEEN REQUESTED WILL NOT BE FORMALLY REVIEWED.**

What Happens Next

After an initial review, the Grants Committee may require further information. You will be asked to supply this information within two (2) working days from the day information is requested.

Prior to granting or at any time over the duration of the project, the Grants Committee may wish to make an onsite visit. A mutually convenient time will be arranged by telephone.

Grants Committee recommendations are approved by the Board of Directors prior to any announcements. Applicants are informed in writing of the Board's decision. Feedback from the Foundation staff on the decisions is possible upon request. The Community Foundation publishes regular newsletters and appreciates the opportunity to feature a grant related project or program particularly if supported by quality photographs.

Workshop

A Grant Application Workshop will be presented prior to each grant cycle. There will be no fee. Date, time and location will be included in Grant Application advertising, and communicated using the Southeast Alberta Regional Directory. Pre-registration is preferred. Applicants may request one-on-one Grant Application assistance from the Foundation staff, time and resources permitting.

Further Information can be obtained by calling the Community Foundation at 527-9038 or by fax 527-9204.

Please forward your completed application to

GRANTS COMMITTEE
Community Foundation of Medicine Hat & Southeastern Alberta
Room 104, 430 – 6 Avenue SE
Medicine Hat, Alberta T1A 2S8

For Office Use ONLY	
Cycle (circle)	Spring or Fall
Grant #	
Activity #	
Amount Approved	

GRANT APPLICATION

Please complete this form in the space provided.

AGENCY INFORMATION

Legal Agency Name			
Address			
Postal Code		Email	
Contact Person		Phone	
Canada Revenue Agency Charitable Registration #			

A brief overview of your agency – why it exists, how long it has existed, and types of programs provided.

Project Title	
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Funds to be used for:

New Project Existing Project
 Core Funding Service Expansion/Improvement

A brief project description – what the need is, how you will address the need, what is the time-line for this project, and the outcome you expect. (In depth information in “question” section of application.)

Total Cost of the Project	\$	Amount Requested from CF	\$
When are the funds required?			

AUTHORIZATION: This form must be signed by two officers of the Board of Directors

Signature _____ Title _____
 Signature _____ Title _____

CHECKLIST - Please check to ensure all documents are enclosed before submitting the application.

- Application Form – completed and signed
- 1 page to include (1) a list of previous grants received from the CFMH, (2) Mission/Vision Statement and Goals of Your Organization
- Board of Directors – Current List including addresses and phone numbers
- Audited Financial statement for last completed fiscal year
- Operating Budget for current year

Is this project budget included in the operating budget for the current year?

- Yes No
- Quotes for Equipment/Training – if applicable

Project Budget Summary

PROJECT REVENUE

Source of Revenue	Assured	Potential
CFMH	\$	\$
Other Funders		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Government (please specify)		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Support from your agency	\$	\$

Total Project Revenue	\$	+	\$	=	\$
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PROJECT EXPENDITURES

Items	Cost
Salaries/Benefits	\$
Professional Fees/honoraria	\$
Capital (specify)	\$
Computers/Equipment (quotes attached)	\$
Other	\$
	\$
	\$
	\$
	\$
	\$

Total Project Expenditures	\$
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BUDGET REVENUES AND EXPENSES MUST BALANCE!

Project Information

1. Describe your current challenge or opportunity that will be addressed by this project:

2. How were these challenges/opportunities identified? Eg. Within your agency, as part of a community needs assessment process, or other. Please document sources of evidence.

3. List the project's goals and objectives.

4. Describe your plan of action:

Project Information

5. Describe any community involvement and collaboration with other agencies:

6. How many adults/children will this project/program directly serve?

7. What percentage of people who could be served – will be served - by this project?

If not 100%, explain:

8. In one or two sentences provide a description of how your program will result in a direct contribution to increasing or decreasing an identified issue within the community? Where possible please provide a link to Vital Signs (www.medicinehatvitalsigns.ca).

9. How will the success of the project be defined? (Measured against goals and objectives outlined in question 3).

Project Information

10. Describe the Process you will use to measure your level of performance and success:

11. What will happen to this project if you receive **partial** funding due to limited funds available, or if the Foundation is prepared to fund only that portion of the project which is of interest to us?

12. How will this project be funded in the future?

13. Duration of Project:

Start Date:

Proposed Completion Date:
