FAMILY AND FRIENDS
COMMUNITY FOUNDATION

Grant Application

Name of Organization _____

Contact person and position _____

Charity number _____

Phone number _____

Address _____

Project title _____

Brief description of your organization's goals and mission

Brief description of project

Benefits to the community

a) Who will benefit? (age, gender, groups)

b) How many will benefit?

c) Is there any potential to involve other community groups in this project? (cost sharing, resource sharing, etc)

d) What fundraising projects has your organization completed in the past year? Or do you have any upcoming fundraising initiatives?

e) Have you sourced any materials, equipment or services for the project locally? If so, please list.

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Timeline

a) What are the project start-up and completion dates of the project?

b) When are the funds required?

Organizational structure

Please provide the names of your board of directors, executive or committee members

Financial summary

Total cost of project _____

Amount of grant requested _____

Funds from other contributors _____

Funds raised thus far _____

Additional financial information _____

Please attach to this application

1) **Most recent annual financial statement which includes balance sheet and profit and loss statement**
2) **Current operating budget**
3) **A quote for the project**

We certify that this application has been reviewed and authorized by the Board of Directors of the organization listed above.

_____

Name Signature

_____

Name Signature

_____

Date

The grant, if approved, must be made to a "qualified donee" as defined under the Income Tax Act and as reproduced below. The applicant confirms (select one):

Name of Organization _____

□ It is a “qualified done”

□ It is not a “qualified done”

1. If the applicant has selected that it is a 'qualified donee , it must select the applicable "qualified donee" category below and provide its charitable registration number, if it has a charitable registration number.

2. If the applicant has selected that it is not a "qualified donee", then the grant must be made to a separate recipient that fits one of the below "qualified donee" categories. The name of the recipient is _____ and the applicable “qualified donee" category that applies to the recipient must be selected below and the recipient's charitable registration number must be provided, if the recipient has a charitable interest number.

“qualified done” categories:

☐ a registered charity (including a registered national arts service organization)

☐ a registered Canadian amateur athletic association

☐ a registered housing corporation resident in Canada constituted exclusively to provide low-cost housing for the aged

☐ a registered Canadian municipality

☐ a registered municipal or public body performing a function of government in Canada

☐a registered university outside of Canada that is prescribed to be a university, the student body of which ordinarily includes students from Canada

☐ a registered charitable organization outside of Canada to which Her Majesty in right of Canada has made a gift

☐ Her Majesty in right of Canada, a province, or a territory

☐ the United Nations and its agencies

Charitable Registration number (if applicable) _____

Note: Only complete the below if the grant is to be paid to a recipient and not the applicant.

If the recipient is other than the applicant, the recipient hereby confirms that it is permitted to and consents to receiving the grant.

_____ Per: _____

Date Name and title

Note: If you are signing this application as a recipient who is not the applicant, if the grant is awarded to the applicant, the grant will be paid directly to your organization. In advance of consenting and permitting the grant to be paid to your organization, as confirmed by your endorsement above, you are encouraged to seek out the necessary tax or legal advice respecting your organization’s rights and obligations and qualification as a “qualified done” under the Income Tax Act for the purpose of receiving the grant and disbursing it to the applicant.