

Please ensure that you provide full, complete and clear answers to the questions on this form, failure to provide the required information may result in your group being ineligible. Missing or unclear information may result in the application being delayed or rejected.

Use a combination of this form and support sheets as needed. Please label your attachments according to the section on this form to which you are responding

PART A – COMMUNITY AGENCY/ORGANIZATION NAME & CONTACT INFORMATION

NAME OF COMMUNITY AGENCY/ORGANIZATION	
CONTACT PERSON	TELEPHONE NO
	EMAIL
MAILING ADDRESS	
WEBSITE (if applicable)	

ORGANIZATION GENERAL INFORMATION

NUMBER OF MEMBERS: _____ MEMBERSHIP FEE (if applicable): _____

TYPE OF ORGANIZATION (i.e.: registered charity, Non-Profit Organization, no status, etc.)

Registered Charity Non-Profit/Not-For-Profit No Status Other _____

INCORPORATED AS NON-PROFIT ORGANIZATION YES NO

YEAR OF INCORPORATION: _____

DOES YOUR ORGANIZATION HAVE AN OPERATING BOARD? YES NO

OUTLINE THE MISSION, PURPOSE AND OBJECTIVES OF YOUR ORGANIZATION.

PART B – GRANT REQUEST

AMOUNT OF GRANT REQUEST \$ MINOR (Under \$20,000) MAJOR (Over \$20,000)

WHAT IS THE MAIN SECTOR YOUR ORGANIZATION SERVICES? (CHECK ONE)

- ARTS & CULTURE
- ENVIRONMENT
- *HOME HEMODIALYSIS (Contact Grant Facilitator)
- HERITAGE/HISTORY
- SOCIAL
- SPORTS & RECREATION
- OTHER

PURPOSE OF GRANT: (Outline what the project is, where it will take place and why it is needed, including any evidence, needs assessment, etc.)

COUNCIL’S STRATEGIC PLAN: Select the one (1) priority this project/program/services aligns with and outline the proposed outcome(s) for the project/program/service

STRATEGIC PRIORITIES – select only 1	OUTCOME(S) – no more than 3 (What do you hope to achieve as a result of this project/program/service?)
<input type="checkbox"/> Promote Artistic Impression in Chestermere (Arts, Culture & Heritage)	1. 2. 3.
<input type="checkbox"/> Develop the Full Cultural Potential of Chestermere to Create aWhole Community (Diversity & Inclusion)	1. 2. 3.
<input type="checkbox"/> Create a Physically and Socially Connected Safe Community	1. 2. 3.
<input type="checkbox"/> Develop the Recreation Potential of Chestermere	1. 2. 3.

COMMUNITY IMPACT: (Please include the benefits the community of Chestermere would receive as a result of this grant. Also include who within the community would benefit.)

ARE THERE PROJECTS/PROGRAMS/SERVICES OF SIMILAR NATURE BEING OFFERED IN THE COMMUNITY?

YES NO

IF YES, HOW WILL THE ORGANIZATION’S PROJECT/PROGRAM/SERVICE COMPLEMENT, ENHANCE, OR DIFFER FROM THOSE OTHER PROJECT/PROGRAMS/SERVICES?

PART C - PROJECT FUNDING

PLEASE INDICATE WHAT OTHER SOURCES OF FUNDING HAVE BEEN RECEIVED OR APPLIED FOR:

- OTHER LEVELS OF GOVERNMENT ROCKY VIEW COUNTY
 FUNDRAISING DONATIONS OTHER SOURCES

PLEASE PROVIDE SPECIFIC DETAILS:

WHAT WILL BE THE IMPLICATION IF A MUNICIPAL GRANT IS NOT APPROVED?

THE CITY OF CHESTERMERE IS TO BE RECOGNIZED AS A SOURCE OF FUNDING. IDENTIFY HOW RECOGNITION OF THE CITY WILL BE PROMOTED.

IF APPLICATION IS FOR A SPECIAL EVENT, PLEASE ANSWER THE FOLLOWING:

1. How many participants are expected?
2. How large an attendance/audience is expected?
3. Will there be a charge for attendance?
4. What areas (locations) will the activities take place?

HOW MANY VOLUNTEERS AND VOLUNTEER HOURS WILL BE CONTRIBUTED TO THIS PROJECT/EVENT? DESCRIBE HOW YOU WILL TRACK VOLUNTEER CONTRIBUTIONS AND YOUR PLAN TO RECRUIT, TRAIN AND RECOGNIZE VOLUNTEERS?

PART D – TO BE COMPLETED FOR MAJOR GRANTS ONLY

ALL MAJOR GRANT APPLICANTS (REQUESTS OVER \$20,000) – PLEASE COMPLETE PART D TO HAVE YOUR APPLICATION CONSIDERED AS COMPLETE FOR ELIGIBILITY

PLEASE LIST AND DESCRIBE ANY PRIOR LARGE SCALE INITIATIVES (OVER \$20,000) COMPLETED BY YOUR ORGANIZATION IN THE PAST 5 (FIVE) YEARS.

PLEASE LIST ANY STAKEHOLDERS/PARTNERS INVOLVED IN THE PROJECT AND THEIR ROLE.

CAPITAL EXPENSES ARE DEFINED AS PURCHASES OVER \$5,000 AND WHICH HAVE A USAGE GREATER THAN ONE (1) YEAR. PLEASE LIST ANY CAPITAL EXPENSES, AND THEIR FULL AMOUNT, WHICH ARE RELATED TO THIS APPLICATION. (For Capital Items, the City may contribute up to a maximum of 50% on a cost sharing basis, however this may be at the discretion of City Council. The organization should provide evidence of the additional 50% of the costs, which may come from any source.)

CAPITAL EXPENSE	AMOUNT
	\$
	\$
	\$
	\$
	\$
	\$

ALL MAJOR GRANT APPLICANTS SHOULD BE AT AN ADVANCED STAGE OF READINESS, DEMONSTRATE GOOD PLANNING, A FIRM CASE FOR FINANCIAL SUPPORT, ORGANIZATIONAL RESILIENCE, AND SECURE LEADERSHIP WITH A PROVEN TRACK RECORD FOR EXECUTING LARGE SCALE INITIATIVES WHICH ARE CONSISTENT WITH THEIR REQUEST.

PLEASE PROVIDE ANY ADDITIONAL INFORMATION THAT MAY SUPPORT YOUR APPLICATION FOR A MAJOR GRANT.

PART E – Signature of Authorized Officials (s) of the Organization

Signature: _____ Position: _____ Date: _____	Signature: _____ Position: _____ Date: _____
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City of Chestermere Community Grant Budget Summary



Income	Amount Proposed
Cash Donations	\$
Program Fees (Registration, Admission)	\$
In-kind contributions (please list)	
1.	\$
2.	\$
Other Grants (please list)	
1.	\$
2.	\$
Other Sources (please list)	
1.	\$
2.	\$
3.	\$
Total Income (without City of Chestermere funding assistance)	\$

Expenditures: (Identify in-kind expenditures with *)	Amount Proposed
Wages, Honorariums	\$
Program Support / Material Cost	\$
Facilities / Studio / Office Costs	\$
Travel Costs	\$
Advertising and Promotion	\$
Other direct related expenditures (please list):	
	\$
	\$
	\$
	\$
Total Expenditures	\$

Projected Surplus / (Deficit) without City of Chestermere funding assistance	\$
REQUESTED GRANT AMOUNT	\$

OTHER FUNDING SOURCES		
Name of Organizations	Amount Requested	Amount Received
1.	\$	\$
2.	\$	\$
3.	\$	\$

*Upon follow up, copies of receipts must be submitted and calculated as Follow Up Actual's on this form. Variations between Amount Proposed and Follow Up Actual should be explained in the follow up report. The City of Chestermere should be advised of any major changes in the budget prior to expenditure. This financial statement must show the entire eligible project expenses incurred, not just the amount granted by the City of Chestermere Community Grant.