

Brockville and Area Community Foundation
2020 Grants Application Form
Please Note: Deadline Extended to May 1, 2020

Date of your Application: _____

Read the form carefully, and answer all questions appropriately.
Please keep the form to a maximum of four pages long including this cover page.

Name of Organization _____

Charitable Registration #: _____ RR _____

Contact person for this proposal _____

Address _____

City _____ Prov. _____ Postal Code _____

Telephone _____ Fax _____

E-mail address _____

Website _____ Facebook _____

Note: Email will be the primary means of contacting your organization about this proposal. Please ensure that this email address will be checked regularly.

Is your organization a registered Canadian charity?

Yes No

If not, is your proposal being sponsored by another registered Canadian charity?

Yes No

If sponsored are you and your sponsor fully aware of the requirements and responsibilities of such a sponsorship arrangement?

Yes No

The Brockville and Area Community Foundation is legally restricted to making grants only to registered Canadian charities. If you are not a registered charity, and your proposal is being sponsored by another charity, there are serious considerations that should be reviewed. For more information, visit the Charities

Canada website at: www.cra.gc.ca/charity

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If you are being sponsored by another registered charity, please complete this section:

Name of sponsoring organization _____

Address _____

City _____ Prov. _____ Postal Code _____

Contact person for proposal at sponsoring Charity _____

Telephone _____ Fax _____

E-mail address _____

Name of registered charity: _____

Charitable Registration No. for the sponsoring Charity if your organization is not a registered charity: _____ RR _____

****Note: no other format or number will be accepted. Your proposal will be declined immediately if you do not provide a valid charitable number in appropriate format (e.g. 12345 6789 RR0001), that can be validated by the Canada Revenue Agency.***

Organization Information

Please provide a *brief* description of your organization's mandate/mission.

Describe how your organization has a strong presence in our preferred geographic area (*local board, committee, branch, etc.*)

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Project Information

Project title: _____

Start date: _____ End date: _____

State the main objective(s) of your project in point form (200 word limit).

State what local need/interest this project addresses and how did you assess this local need/interest?

How many persons in total will directly benefit through active participation in this project?

How many indirectly will benefit?

What is your total budget for this project?

How much are you requesting (\$500 to \$2500)? If full amount of request is not received will the project proceed?

Will your project be solely funded by this grant? If not what is the source of the additional funding?

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Please describe your proposal, including how you will allocate the money from this grant.

Please describe what measures you will use and how you will evaluate whether you achieved your objective(s)?

How will your initiative further the Foundation's ultimate mission of strengthening and enhancing the quality of life in the community?

If you receive this grant, how will you publicly recognize BACF and the impact of the grant? Include a summary of its anticipated impact and how you plan to share publicly?

****Note: BACF will contact your organization regarding the successful completion and outcomes of the project, media recognition and/or photographs, and accountability of disbursed funds.***

**Preference for Applications is by email to:
info@yourcommunityfoundation.ca
or mail to: P.O. Box 155, Brockville, Ont., K6V 5V2
Deadline for receipt of application: May 1, 2020**