



Box 744 Lac du Bonnet MB R0E 1A0

Grant Application for Community Funding

General Funding Criteria for Lac du Bonnet & District Charitable Foundation

1. **Applicant must be "Qualified donee" as defined by the Canada Revenue Agency**
2. *The project is occurring within the application year.*
3. *The project is not designed for the purpose of financial profit for the proponent.*
4. *The project has direct benefit to the residents of the Town & RM of Lac du Bonnet and local area.*
5. *Preference will be given to those projects that will provide the most good to the community.*
6. **Funding cannot be used for:**
 - a. *Individual, family, religious, political or avocation purposes.*
 - b. *Organizations whose prime purpose is fundraising.*
 - c. *Professional activities or associations.*
7. **Eligible project costs include:**
 - a. *Materials, supplies, equipment*
 - b. *Capital projects or renovations (preferred)*
 - c. *Equipment or facility rentals*
 - d. *Instructor Fees & Travel Expenses when required for the project*
8. **Funding may be available for qualified projects within organizations already funding by government or other sources of funding.**
 - a. *Projects from groups that are already generally and adequately funded by government or other funding sources will be assessed on an individual project basis.*

Note: If application does not meet these eligibility requirements then they do not qualify to receive funding.

If space is insufficient, please add supplementary data. Please submit your application using this form in Microsoft Word please free to add text or pictures as needed to make the application complete.

A: ORGANIZATION INFORMATION

Name (full name) _____ Telephone _____

Address _____

Date established: _____ No. of employees or volunteers : _____

Charitable Status Registration Number from CRA _____

1. Provide a general description of your agency or organization, including population directly served and principal geographic area of service.

2. Attachments are **required** for the following (if these attachments are not provided the application will be rejected):

_____ A copy of the organization's latest financial statement for 2 years

_____ A copy of the organization's budget for the current year

_____ A copy of the organization's last annual report

_____ A list of the organization's executive and directors

_____ A copy of the current project plan (if available) for which this grant is being made

_____ A list of any grant requests previously submitted to the Lac du Bonnet & District Charitable Foundation.

_____ A list of other funders approached, including responses

B: PROJECT INFORMATION

Amount requested _____ Total project cost _____

When are funds needed? _____

3. Describe the project, including the cost, its purpose and how it relates to the overall mission of your organization.

4. Cite evidence of the need for the project specifically stating its significance to the local community. Describe any consultations with government or other agencies that relate to this project.

5. How will you measure achievement of the project's objectives? Include a timetable for implementing these objectives. Do you have a plan for a specific evaluation of both the project's benefits and its costs?

6. Describe the capability of your organization to conduct the project and note special staff qualifications.

7. If the project is successful, what financial resources will be available for its continuation?

8. How will this project directly impact the community of Lac du Bonnet in a positive manner?

9. Has this request been authorized by your organizations board? Yes ___ No ___
When? _____

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10. How long do you estimate that they project will continue to benefit the people of Lac du Bonnet? _____ years
11. How many people do you expect that your project will benefit in the future. _____
12. How many people and partners do you have that are in support of your project? Describe.

13. What has been your support of the Lac du Bonnet & District Charitable Foundation for past events?

This application must be signed by the President or another officer of the organization's governing board.

Name _____ Title _____

Signature _____ Date _____

Name of individual from whom further information may be obtained:

Name _____ Title _____ Telephone _____

Email _____

NOTE: Completion of this application form gives the Lac du Bonnet Foundation consent to use photos, videos, and/ or testimonials of the grant recipients.

Please submit Grant Application and all supplementary documents to:

**Lac du Bonnet & District Charitable Foundation
Att. Mitch Walker, Box 744, Lac du Bonnet, MB R0E 1A0**

Email: grant@lacdubonnetfoundation.ca

DEADLINE MARCH 31 and SEPTEMBER 30