

# **NORTH ALGONA WILBERFORCE TOWNSHIP**

## **Community Grant Application**



**The Township of North Algona Wilberforce may provide assistance and support to community organizations and associations in recognition of these groups as a valuable resource in helping the municipality provide a strong community focus.**

**North Algona Wilberforce is an attractive and prosperous community, driven by extraordinary volunteers, supported by exceptional municipal services.**

### **Special/Community Event Grant**

**\*\* PLEASE READ THROUGH THE  
CONDITIONS AND THE FUNDING  
ELIGIBILITY ON PAGES 8 & 9 BEFORE  
COMPLETING APPLICATION**

**Completed forms must be submitted  
for projects scheduled for the next  
calendar year.**

North Algona Wilberforce Township  
1091 Shaw Woods Road  
Eganville, ON K0J 1T0  
Telephone: 613 628-2080  
Fax: 613 628-3341  
Email: [naw@nalgonawil.com](mailto:naw@nalgonawil.com)

## **Instructions for Community Grant applications.**

### How to Complete Your Application

Applications must be submitted using the North Algona Wilberforce Township Application form. Applications submitted on any other form will not be accepted.

Answer all of the application questions as concisely as possible.

It is preferred that the application be submitted using the downloadable version posted on the municipal website. However, if this is not possible please complete the application by typewriter or by hand, using legible printing.

### How to Submit Your Application

Send your application to:  
North Algona Wilberforce Township  
1091 Shaw Woods Road  
Eganville, Ontario  
K0J 1T0



Special/Community Event Grant Application



## Special Event/Community Event Grant Application

Please ensure that you provide full, completed 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

### ORGANIZATION GENERAL INFORMATION

NUMBER OF MEMBERS \_\_\_\_\_ MEMBERSHIP FEE, IF APPLICABLE \_\_\_\_\_

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

INCORPORATED AS NON-PROFIT ORGANIZATION \_\_\_\_\_ yes \_\_\_\_\_ no

OUTLINE THE MISSION, PURPOSE AND OBJECTIVES OF YOUR ORGANIZATION.

## PART B – GRANT REQUEST

Under what classification are you requesting a Grant?

☐ SPECIAL

☐ COMMUNITY EVENT GRANT

☐

IN-KIND CONTRIBUTION GRANT (Provision of facilities, materials or resources)

AMOUNT OF GRANT REQUEST \$ \_\_\_\_\_

IN-KIND SERVICE REQUESTED \_\_\_\_\_

LAST REQUEST FOR ASSISTANCE: Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Received: \$ \_\_\_\_\_

In-kind Services Received: \_\_\_\_\_

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

☐ Arts and culture

☐ Beautification/Horticulture

☐ Environment

☐ Heritage

☐ Sports/recreation

### PURPOSE OF GRANT

(Provide an overview of the service your organization provides to the community and how this supports Council's Strategic Priorities. Please include the benefits the community would receive as a result of this grant. Also include who within the community would benefit)

**PROJECT FUNDING:** (Indicate what other sources funding has been received or applied for. (Use a separate page if necessary)

☐ Other levels of government      ☐ Fundraising events      ☐ Donations      ☐ Other sources

Please provide specific details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARE THERE SPECIAL EVENTS/COMMUNITY EVENTS OF SIMILAR NATURE BEING OFFERED IN THE COMMUNITY?**  
☐ Yes, ☐ No IF YES, HOW WILL YOUR ORGANIZATION'S EVENT COMPLEMENT, ENHANCE, OR DIFFER FROM THOSE  
OTHER EVENTS BEING OFFERED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WILL NORTH ALGONA WILBERFORCE TOWNSHIP BE THE PRIMARY FUNDING SOURCE OF THIS SERVICE/PROGRAM?** ☐ Yes ☐ No

**IF NO, WHICH OTHER BUSINESSES/ORGANIZATIONS ARE INVOLVED IN THIS PROJECT/EVENT?**  
**PLEASE DISCRIBE WHICH AND THEIR ROLES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**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 proposal? Describe how you will track volunteer contributions and your plan to recruit, train and recognize these volunteers.

**PROPOSAL WORKPLAN** (use table provided below)

Please keep in mind the simplicity or complexity of your project/event to guide you about the level of information you provide. This information is important during the review of your application.

Activities That Need To Be Completed	Date Activities Need To Be Completed	How Activities Will Be Completed

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Note: Please be sure to consider and list all approvals, licenses, or permits that may be needed for your project/event. Also, please describe how you will address any insurance or liability issues.

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Sample Budget format to be used to demonstrate funding request				
	2022 Actual	2023 Budget	2023 Projected to Year-End	2024 Requested
Revenue				
North Algona				
Wilberforce				
Program Revenues				
Donation/fundraising				
other (specify)				
Expenditures				
Salaries and wages,				
Material and				
supplies Other				
Capital				
Expenditures				
Surplus / (Deficit)				

NOTE: The release of all grant funds is contingent upon the Township receiving a copy of your financial statements for the previous year. (If your financial statements do not clearly identify Township funding request, please use the notes to indicate in which revenue category Township funding is included).

Notes
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PART C – Signature of Authorized Officials (s)	
Signature: _____	Signature: _____
Position: _____	Position: _____
Date: _____	Date: _____

## APPLICATION CHECKLIST

Copies of the proposed and current year's budget, detailing expenditures and revenues, including other grants and other sources of revenues must be submitted with this request.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Current Budget             | <input type="checkbox"/> Proposed Budget | <input type="checkbox"/> Statement of Financial Position, signed by 2 Directors |
| <input type="checkbox"/> Board of Directors Listing | <input type="checkbox"/> AGM Minutes     | <input type="checkbox"/> Statement of Revenue and Expenditures                  |

## ATTACHMENTS AND CONDITIONS

Please ensure all required attachments are submitted with your application. Applications will not be reviewed unless all required attachments are received.

### **Funding Eligibility**

An applicant organization must meet the following general criteria in order to be considered for a North Algona Wilberforce Township grant:

- Grants are awarded by the type of project, not the type of organization/agency.
- The applicant organization must benefit the residents of the Township of North Algona Wilberforce.
- Grant applications should be able to demonstrate active fundraising efforts to support the continuation of a program, project, or service.
- The Township of North Algona Wilberforce should not be considered as the primary source of funding for the organization.
- Funding requests can be defined as events/projects/programs that support, sustain, promote, inform, educate, celebrate, preserve, and/or provide access to the arts, culture, environment, heritage, and recreation activities.
- Request for financial assistance for events of a municipal, provincial, or national significance which would be expected to bring economic and/or public relations benefit to the Township.
- Each application must demonstrate there is a need for financial assistance and that adequate funding from other sources is not available.
- To qualify for funding, the group must demonstrate its commitment to all the following principles:
  - Accessibility;
  - Effectiveness; and
  - Accountability through sound management and financial practices.
  -
- Individuals are not eligible
- Funding will not be provided for accumulated deficits or funding shortfalls of any organization. Financial assistance consideration is based only on budget revenues and expenditures in the year for which the assistance is requested.
- The applicant organization, within the current fiscal year, must spend grant funding on the sole purpose for which it was awarded.



## Conditions

- In the event that the funds are not used for the event, project or initiative as described in the application, or if there are misrepresentations in the application, the full amount of the financial assistance may be payable forthwith to the municipality.
- If there are any changes in the funding of the event, project or initiative from that contemplated in the application the municipality will be notified of such changes.
- The Organization will make or continue to make attempts to secure funding from other sources as indicated in its application.
- The Organization will keep proper books of accounts of all receipts and expenditures relating to the event, project or initiative.
- The Organization will make available for inspection by the municipality or its auditors all records and books of accounts of the Organization upon request from the municipality. An audited statement will be required, and the Organization will be responsible for any cost associated with procuring an audited statement.
- If the event, project or initiative proposed in the Organization's application is not commenced, or not completed, and there remains municipal funds on hand; or the project or program is completed without requiring the full use of the municipal funds; or Council directs that the funds be returned; such funds will be returned to the municipality. Exceptions are made for funds received for a multi-year event, project or initiative, as outlined in the Community Partnership and Development Fund Program Policy.
- The project or program may not be represented as a municipal project or program, and the Organization does not have the authority to hold itself out as an agency of the municipality in any way, the only relationship being that the municipality has approved and granted financial assistance to the Organization.
- In all cases, the Organization will still be responsible to meet any requirements for permits, licenses and insurance.