

CHILLIWACK FOUNDATION GRANT APPLICATION FORM

Directions: Complete all sections of this Application Form. Additional pages may be attached if more space is required and supporting documents should be attached as necessary. Please submit 10 copies of this Application Form and the necessary supporting documents to the Chilliwack Foundation at the following address:

Chilliwack Foundation
c/o MNP LLP Accountants
45780 Yale Road West
Chilliwack, BC V2P 2N4

Application Due Dates: The copies of the completed Application Form and supporting documents must be submitted on or before the application deadline for the current Grant season (Spring or Fall), which can be found on the Chilliwack Foundation website.

Note: In order to qualify for a Grant from the Chilliwack Foundation, the funds requested must be used for capital projects or the capital components of projects, including the purchase of equipment and renovations to buildings. Requests for funds for operations, including salaries, will not be entertained.

APPLICATION SUMMARY

NAME OF ORGANIZATION: _____

CANADA REVENUE AGENCY

CHARITY REGISTRATION NO.: _____

SHORT DESCRIPTION OF PROJECT:

GRANT AMOUNT REQUESTED: _____

1. ORGANIZATION DETAILS

Name of Organization: _____

Address: _____

Telephone Number: _____

BC Society Registration Number: _____

Canada Revenue Agency Charity Registration Number: _____

Executive Director/Manager: _____

Board of Directors (names, addresses, telephone numbers)

Briefly state the history of your organization:

2. PROJECT AND GRANT DETAILS

Short Title: _____

Briefly describe the proposed project, its specific goals and how they will be accomplished:

What Grant amount is being requested from the Chilliwack Foundation? _____

How will the Grant funds be used? _____

What are the projected start-up and completion dates? _____

When would the Chilliwack Foundation Grant funds be required? _____

What provision will be made for interim and final reports? _____

What is the rationale for this project? What needs is it designed to meet, and for what target population?

How does this project relate to the overall purpose and priorities of your organization?

How will the project benefit the Chilliwack community?

3. FINANCIAL STATEMENTS

Please attach 10 copies of your organization's most recent Financial Statements and Current Year Budget

4. PROJECT BUDGET SUMMARY

Budgeted Project Expenditures:

Salaries \$ _____

Rent/Utilities _____

Capital Costs _____

Other Expenditures:

(specify) _____

Total: \$ _____

Budgeted Project Revenue Sources: (Note: Please list all proposed sources of revenue for your project)

Source	Amount	Confirmed Y/N
Total	\$	

Total \$ _____

4. SIGNATURES

Project Manager

Signature

Name (please print)

Board/Chair/President

Signature

Name (please print)

Date: _____