# ST. J@HN'S

## **CS – Community Grant Application**

**Community Services** 

# **Community Grant Application**

Contact Information			SECTION 1	
Address				
Tel (home)	(work)	(cell)		
Email	Webs	site		
Incorporation Number (fi	rst-time applicants to submit	proof of Articles of Incorporation a	nd	
Amendments thereto)				
Grant Request			SECTION 2	
Amount requested from	the City			
Percentage of total budg	get			
Have you previously received funding through the City of St. John's Grant Program? Yes No				
If yes, most recent year				
Provide a brief description of the intended use of the funds requested (e.g., activity, program, event):				
			_	

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Organizational Background Information	SECTION 3
Please provide an overview of last year's programming and progress:	
Briefly describe the purpose and objectives of the organization:	
Describe the general types of programs and services being offered by the or	ganization:
Do volunteers participate in your programs and services?: Yes	No
If yes, please indicate the numbers and type of involvement:	-



Organizational Background Information Continued SECTION				SECTION 3	
Please provide a breakdown of registration numbers, for this year, for the various programs offered by your organization. For national organizations, these numbers <b>must</b> be local.					
Organization Operating E	Rudaet			SECTION 4	
Applications must be acc (audited if available) and			nts for the prev	ious year	
The following template is attachment in an alternat	•	year budget; however, yo	ou may submit	as an	
Is the fiscal year for your	organization January 1 t	o December 31?	Yes N	No	
If no, please identify					
We require a detailed <b>ba</b>	lanced budget for your l	local organization.			
Revenue	2022 Actual (or est.)	Budget for 2023 Year	Requested	Confirmed	
Federal Government Grants					
Provincial Government Grants					
Private/Other Grants					
Donations					
Adult Membership Revenue					
Other Membership Revenue					
Other Revenue (specify)					
Prior Year Surplus/Deficit					
Sub-Total				-	
Requested City Grant					
Total Revenue					

Form last updated: 2022-09-14

**CS – Community Grant Application** 

**Community Services** 

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Organization Operating Budget Continued		SECTION 4
Expenditures	2022 Actual (or est.)	Budget for 2023
Salaries and Benefits		
Office and Equipment Supplies		
Other Expenses		
Facility Rental		
Equipment Costs		
Insurance		
Travel/Conferences		
Interest and Bank Charges		
Professional Fees		
Total Expenditure		
Total 2023 Revenue		
Total 2023 Expenses		

Applicant Declaration (two signatures required for groups/organizations)

**SECTION 5** 

It is the responsibility of the applicant to ensure all required information is submitted. Incomplete applications will be considered ineligible.

I AFFIRM THAT the information in this application is accurate and complete, and the financial information is fairly presented. I agree that once funding is provided, any change to the organization program delivery will require prior approval from the City of St. John's. I agree to publicly acknowledge funding and assistance by the City of St. John's. I understand that the information provided in this application may be accessible under the Access to Information Act. I also agree to respect the spirit and intent of the various acts governing the programs of the City of St. John's.



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Applicant Declaration Continued		SECTION 5
Signature of two principal officers of the grou	up or organization:	
Name	Title	
Address		_ Date
Signature		
Name	Title	
Address		_ Date
Signature		
Important Information:		
Applications must be received no later than	4:00 p.m. on the last Fr	iday in November.
Ensure that you have completed all sections	and enclosed all reque	ested documentation:
<ul><li>Local Organizational Financial Staten</li><li>Detailed budget</li><li>Local Program Statistics</li></ul>	nents	
The subject line for submission should be "0	City Grant – Community	<b>y</b> ."
Incomplete applications will be considered in	neligible.	

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Privacy Notice SECTION 6

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for the purpose of grants administration. Questions about the collection and use of the information may be directed to the Supervisor of Tourism and Events, Community Services: <a href="mailto:citygrants@stjohns.ca">citygrants@stjohns.ca</a>.

#### Submissions Information

Email: <a href="mailto:citygrants@stjohns.ca">citygrants@stjohns.ca</a> with the subject line "City Grants-Community."

Emails including all attachments **must not exceed 25MB**. Acceptable file formats are: pdf, docx, xlsx, jpg, png, mp3, wav, mp4, mpeg, mov, zip.

If you require assistance in submitting your application electronically, please contact <a href="mailto:citygrants@stjohns.ca">citygrants@stjohns.ca</a>

#### For More Information

Email: <a href="mailto:citygrants@stjohns.ca">citygrants@stjohns.ca</a>

Call: (709) 570-2186



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