



## Port Coquitlam Community Foundation Grant Application - 2020

THE FOUNDATION RESERVES THE RIGHT TO DISQUALIFY ANY APPLICATIONS THAT ARE INCOMPLETE, ILLEGIBLE AND/OR DO NOT OTHERWISE FOLLOW THE SUBMISSION GUIDELINES.

**Grants are available to registered charities whose projects directly benefit the residents of Port Coquitlam.** All projects and programs must submit final report to PCCF by June 30<sup>th</sup>, 2021.

Name of Applicant Organization: \_\_\_\_\_  
*(as it appears on the Canada Revenue Agency list of Registered Charities)*

Operating Name of Organization: \_\_\_\_\_

CRA Registered Charity Number: \_\_\_\_\_ RR \_\_\_\_\_

Name of contact person: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Preferred Method of Contact: \_\_\_\_\_

1. Project Title: \_\_\_\_\_

2. Project Description and Goal(s): Max. 300 words

3. Please note that for this granting cycle, up to \$5000 is available per grant. State the amount of grant funding your organization is requesting: \$ \_\_\_\_\_
4. Number of employees (related to this project): \_\_\_\_\_
5. Number of volunteers (related to this project): \_\_\_\_\_
6. Describe your organization community involvement. Include a purpose statement for your organization, if available.

7. How would you describe the focus of your project (Check all that apply)?

- Health & Wellness       Education       Arts & Culture  
 Environment       Social Services       Sports & Recreation  
 Other: (Please specify) \_\_\_\_\_

8. What other funding for this project has been requested or committed to date?  
List source and amount:

|         |  |    |
|---------|--|----|
| Source: |  | \$ |
| Source: |  | \$ |
| Source: |  | \$ |
| Source: |  | \$ |

9. Project timeline:

- A. Proposed start-up date: \_\_\_\_\_
- B. Completion date: \_\_\_\_\_

C. Project Milestones:

10. Will the grant be used for a capital project?       Yes       No *If no skip to question 13*

11. If the grant is for a capital project, who will own the asset?

12. For capital projects, how will the facility be maintained/ operated once constructed? (If operating funding has been obtained from other sources, please attach letters of confirmation)?

13. List other organizations or individuals cooperating or partnering in this project, if applicable.

14. Will the project proceed if the funding awarded by the PCCF is less than requested by your organization? If yes, what modifications would you make?

15. Project Objectives:

A. How does your project strive to have a lasting impact in our community and benefit the residents of Port Coquitlam?

B. How does your project build on existing community strengths and assets? (If the program or project you are proposing is similar to a project or program already operating in Port Coquitlam, please highlight how your project is different or explain how you would partner with the existing program provider.)

C. Statement of Innovation: Provide a brief description of how your proposal is innovative. (e.g. taking a new approach to delivery of program or ability to address a community challenge)

D. How will you measure the success/results of your project?

I HEREBY DECLARE THE ABOVE INFORMATION TO BE CORRECT TO THE BEST OF MY KNOWLEDGE AND IF THE FOUNDATION GRANTS AN AWARD FOR THIS PROPOSAL, THE FUNDS WILL BE USED FOR THIS PURPOSE ONLY. I ALSO AUTHORIZE THE FOUNDATION TO VERIFY THE INFORMATION PRESENTED.

On behalf of the Applicant organization:

|  |                  |
|--|------------------|
| Print Name: _____                              | Signature: _____ |
| <i>Administrator/Staff Rep (if applicable)</i> |                  |
| Print Name: _____                              | Signature: _____ |
| <i>Chairperson/Board Representative</i>        |                  |
|  | Date: _____      |

NOTE 1: Any organization whose submission is selected in this process will be required to sign a contract and agree to specific final reporting.

NOTE 2: The PCCF reserves the right to request additional information in any of the previous categories listed in this document.

Provide the following documentation:

- A. Project budget (using the PCCF Budget Document)
- B. List of applicant organization’s Board of Directors, positions and contact information
- C. List of applicant organization’s staff (and their applicable titles) who will be directly involved/ responsible/ accountable for this project
- D. Applicant organization’s financial statements for the last fiscal year (audited, if available)

**PLEASE SUBMIT ALL DOCUMENTS INCLUDING THIS APPLICATION IN A SINGLE PDF.**

**Please note that all submitted materials become the property of the PCCF.**

Please return the required documentation to the Port Coquitlam Community Foundation by email to **info@pcofoundation.com** by midnight on March 15, 2020.

**Late submissions will not be accepted.**