

Letter of Intent Form – Community Grant Program

Section 1: Applicant Info	ormation				
Name of Organization					
Full Mailing Address					
City		Prov.		Postal code	
Application contact name & title (please print) who can be contacted by Committee in case of questions					
Phone	Mobile			Fax	
Email				Date	
How long has your organization been in existence in South Frontenac? Select the most appropriate of the following options and fill in the fields below: Our organization is a charity registered with Canada revenue agency. Our Charitable Registration Number is (Format: 12345-6789 rr0001)					
Our organization is a not-for-profit organization Type of organization:					
Names of Signing Officers:					
Grant Stream being applied for:					
Name of project:					
Amount requested:					

Sommanity Static Program 2024				
Description of Organization				
Describe your organization in up to 250 words.				
Section 2: Project				
Describe your project in 75-100 words. This summary may be used to publicize the project.				

The following questions can be answered in short point form:

What are the main objectives of the project?

What need does it address?

If applicable, who will be served by this project?		
List the main activities you plan to carry out.		
List the expected outcomes/results.		
How will the project have a positive impact on the quality of life in this community?		
When will the project start and end?		
Start:		
End:		

