|  |
| --- |
| **Section 1: Applicant Information** |
| 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 non for profit organization Type of organization:  |

Names of signing officers:

|  |  |
| --- | --- |
| **Name of project:** |  |
| **Amount requested:** |  |

## **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:

### Area Served: What is the geographic area served by this project?

### Funding: How much funding are you seeking and for what activities/project expenses?

***Please attach a project budget. Cost estimates should be based on actual quotes whenever possible and applicable.***

### List other funding groups you have approached at this time. If you have only applied to the township, explain why.

***To be considered complete, a copy of your most recently completed financial statements must be included with your application.***