

Corporation of the City of Port Colborne Grant Application

The granting program is divided into two specific periods. First due date is January 31st of each year and the second due date is June 30th of each year. Your organization can only apply **once** in a fiscal period.

Please keep responses to the following questions to three or four pages in total. In addition, please be sure to supply **all** of the required attachments listed. Failure to answer all questions and supply requested documentation will result in the rejection of your application.

Six copies of your completed application must be received by 4:30 p.m. on the appropriate due date. If the due date falls on a weekend, the application is due on the following Monday.

Late or incomplete applications will not be considered.

Applications may be sent or dropped off as follows:

Nancy Giles, Executive Assistant
City of Port Colborne
66 Charlotte Street
Port Colborne, ON L3K 3C8 (after hours drop box available)
Fax: 905-835-2969
Email: mayoradmin@portcolborne.ca

1. Date	
2. Name of Organization	
3. Current contact information (include address, phone, fax, email, contact person, name and title of senior staff person)	
4. What is your purpose or mission statement?	
5. What is the total amount you are requesting for this grant?	
6. What is the proposed use of these funds? (please attach a detailed budget for the use of the funds and any written explanation)	

<p>7. Please provide a brief description of your initiatives/programs. (summarize for which programs/activities your organization will use the funds)</p>		
<p>8. What is the overall outcome that you hope to achieve through your initiative? (tell us how the community will be better as a result of your program)</p>		
<p>9. Who benefits from your activities and how many people receive services? (Describe any special characteristics about the people who participate in your programs/activities. If your program is a regional program, specify the number of clients served by geographic area using municipal boundaries.)</p>		
<p>10. How does your organization work with others in the community? (Indicate any current formal or informal partnerships, collaborations or networks that are of benefit to your organization. Indicate any membership affiliations - national, provincial, regional or local).</p>		
<p>11. Do volunteers assist your organization?</p>		
<p>12. How does your Board of Directors ensure the organization is accountable? (please include such information as policies and long term or strategic plans)</p>		
<p>13. How will you evaluate your activities to know you have been successful? (Describe any measurement tools used to evaluate programs/activities such as statistical data, questionnaires, interviews, outstanding achievements, etc.)</p>		
<p>14. Type of Organization</p>	<p>Not-for-profit</p>	
	<p>Registered Charity - registration # _____</p>	
	<p>Other</p>	

Attachments:	Included:
Cover letter signed by Board Chair	
Current list of Board of Directors including name and office of the members.	
Detailed budget for the next 12 months approved by the Board of Directors – include all sources of revenue and all proposed expenses.	
Most recent financial statements.	
Property report outlining property acquired/renovated using the grant funds and the total value of the funds applied to the property	

Failure to include all attachments will result in an incomplete application.