Saskatoon Collaborative Funders Partnership

Application Deadline: February 16, 2021 Please email completed applications and attachments to **grants@saskatoon.ca**

Legal/Registered Name of Organization:				
Mailing Address:		P /	'C:	
Phone Number:	Email:			
Name of Primary Contact:				
Website:				
Organizational Purpose: Describe the primary 100 words or less.	purpose or mission	on of your org	anization in	
Type of Organization:				
Does your organization have General Liability	y Insurance?	Yes	No	
If yes, General Insurance Amount:				
General Insurance Policy Number:				
Are other organizations in Saskatoon and area	a offering similar	services:	Yes	No
If yes, have you had discussions about working	g together or ama	lgamating?	Yes	No
Organization Corporate Status:				

Entity Number:

My organization is a (select all that apply):

Cooperative, Saskatchewan

Registered Charity, Canada

Registered Lobbyist

Has a Board of Directors

Entity Number, if applicable:

Does your organization have a GST Number?

Yes

No

If yes, GST Number:

Does your organization pay Property Tax to the City of Saskatoon?

Yes

No

Information About Your Project/Program/Service/Initiative

Name:

Request: Amount of money requested from the Saskatoon Collaborative Funding Partnership

Project Description: Describe what you are going to do and how you are going to do it in <u>750 words</u> or less.

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1	ypc	OI	LIU	jcci/	110	grain		VICC	/ T	uai	IVC.

Please provide contact in	ering with other organizat formation for purposes of ne, phone number and em	f verification. Give names			
_	o is the primary target pop m is open to all or the gen	• - •			
Target Age Group(s):	Preschool (0-5)	Children (6-12)	Youth (13-18)		
	Young Adults (19-29)	Adults (30-64)	Seniors (65+)		
Gender:	Female	Male	Not Specified		
Vulnerable/Marginalize	ed Group(s):				
	Indigenous People (First Nat	LGBTQ2S+			
	Racialized Minorities and No	ewcomers	Women & Girls		
	Youth (under 18 years old)	Seniors/Elders			

Special Needs/Disabilities

3

Other

Target Population Continued:

Quality of Life/Health Related Issues:

deaf and hard of hearing blind or visual impairment mobility

speech or language chronic health condition other

addictions/mental health cognitive abilities/learning capacity

Number of Participants: How many people do you expect to participate in your program/project/service/initiative?

If your project is an awareness campaign aimed at the general public, how many people do you expect to reach?

Involvement of Target Population: How will you involve the target population in the design, delivery and evaluation of your project/program/service/initiative? (Check only those with the most relevance to your program.)

representatives will sit on advisory committee/board of directors

community consultations/focus groups will be held

members of the target population will assist with design, delivery and/or evaluation of the program

informal

contacts and conversations will be held

other

Purposes/Outcomes: What are the anticipated outcomes of your program/project/service/initiative? (Check a maximum of two boxes.)

better health for individuals greater cooperation

better health/wellbeing for entire communities higher standard of living in community

safer community increased participation in community life

more people with adequate housing increase participation in the economy

reduction in drug/alcohol use greater self-reliance for individuals and families

higher education levels improved service delivery

increased skill levels other

Focus: What is the focus of your project/program/service/initiative? (Check a <u>maximum of two</u> boxes.)

the arts infrastructure - development and/or maintenance

community safety physical/mental wellbeing of individuals/groups

Focus Continued:

crime prevention/reduction food security

cultural development anti-racism and/or reconciliation

education/upgrading/skill dev. wellness/health promotion

homelessness/housing other

Location: Where will the project/program/service/initiative be provided?

city wide particular neighbourhoods (please specify below)

area outside Saskatoon (please specify below) other (please specify below)

Delivery Methods: What method will you be using to deliver services? (Check only the primary methods that will be used.)

counselling (one on one) one-time special event

counselling (group) drop-in centre

home visits on-the-job training

classroom instruction toll-free telephone line

workshop/seminar other

online communication (Zoom, Skype, etc.)

service/initiative? (Max 250 words)	0 1 1	, 1 5 1 .	,
Dates: Estimated start and end dates of t an ongoing program and service please is	_ ,	· -	oplying for
Project Start Date:	Project End	d Date:	

Awareness Method: How will you make the target population aware of your program/project/

Results of your Project/Program/Service/Initiative

In this part of your application, please tell us how you intend to evaluate or measure the results of your project/program/service/initiative.

Evaluation Methods: What methods will you use to measure the results of your project/program/ service/initiative? (Check only those that are most relevant.)

Please be sure the information you provide below relates back to the anticipated outcomes for your project.

written survey of program participants
interview with program participants
focus groups with program participants
pre/post assessment with program participants
written survey of professionals (teachers, social workers, etc.) working with program participants
interviews with professionals (teachers, social workers, etc.) working with program participants
counting - number of program participants, number of meals served/lbs of food, shelter nights
provided, number of phone calls received, etc.

other

Describe in 300 words or less what you hope to achieve through this project? Include the proposed impact or change that you are intending to see as a result of this project/program/service/initiative.
Describe in 300 words or less how you will know if you have achieved your desired results?

In the questions below please provide information about in-kind contributions and budget for the project/program/service/initiative you are proposing.

Budget: The budget must be balanced. (Income must be equal to expenditures.)

Income

Amount

Request from Saskatoon Collaborative Funding Partnership

Cash donations/fundraising

Grants from other sources (list and describe below)

Revenue (eg. fees)

Other (list and describe below)

Total Income

Expenses Amount

Staff salaries

Staff benefits

Honorariums

Program expenses (eg. food, paper, books, sports equipment, etc.)

Equipment (eg. computers, fridge, stove, etc.)

Transportation

Promotion/publicity

Evaluation expenses

Building rent

Other

Other

Other

Total Expenses

Other Sources of Income: Have you applied for funding from other agencies for this project/

program/service/initiative? Yes No

Please describe them below. (See example.)

Funder Name Amount Requested Amount Confirmed

SK Government (Ministry of Education) \$4714.24 \$4714.24

Saskatoon Collaborative Funders Partnership

Certification: All applicants must complete this certification.

I give permission for the information in this application to be shared with all members of the Saskatoon Collaborative Funding Partnership.

I hereby certify that the information contained in this application is accurate and complete.

I Agree

Board A	Approval:	Has your	board	of directors	seen and	l approved	this ap	plication?
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Yes No Not Applicable

Signature:	Date:

Attachments to Include:

- 1) Financial Statements (.RTF or .PDF only)
- 2) Budget to Actual Please attach a copy of your organizations most recent financial statement with a comparison to your budget for the same time period (budget to actual). For provincial or national organizations, please provide a summary of revenue and expenses for the Saskatoon office. (.RTF or .PDF only)
- 3) Board of Directors List
- 4) In-Kind Contributions What non-cash, in-kind contributions will be available to this project? For example, in-kind contributions include use of office or meeting space, transportation services, use of office equipment, access to secretarial and administrative support, and volunteer time. (Refer to application guide for more information about in-kind contributions.)

For questions, please contact the Grants Administration Clerk at **306-975-3383** or by email at **grants@saskatoon.ca**