



GRANT APPLICATION

This PDF should be saved to your computer desktop and then attached to an email for submitting. Call 250-706-3536 if you need assistance.

Before completing this application please review grant criteria at www.sccef.org.
Click on **Grants**, Click on **Applying for a Grant**

Application Summary

Legal Name of Organization:			
Operating Name of Organization: (if different than above)			
Project Title:			
Project description and relationship to goals of your organization: (max 6 lines)			
Amount Requested from the South Cariboo Community Enhancement Foundation: \$			
Total Project Budget: \$			
How did you become aware of the South Cariboo Community Enhancement Fund Grant Program? (Choose all that apply)			
Free Press Paper	Browser search/Website	Word of Mouth	Other:
Online ads (FB)	Fair/Trade Show	Radio	

Section A – General Information Regarding Applicant Organization

1. Address:		
City/Town:	Province:	Postal Code:
2. Phone:	Fax:	
Email:	Website:	
3. Registered Charity Number:		
4. Board of Directors: (Please attach list) ☐ Yes ☐ No		
Chairperson/President:		
Phone:	Fax:	
Email:		

Executive Director/Senior Staff:	
Phone:	Fax:
Email:	
Project Manager:	
Phone:	Fax:
Email:	

5. Describe your organization's mandate and current areas of focus: (max 7 lines)

6. Financial Year:		
From: YYYY/MM/DD:	To: YYYY/MM/DD:	
Operating Budget for current year Included:	☐ Yes	☐ No
Project Budget (summary below is sufficient):	☐ Yes	☐ No
Project Budget Included:	☐ Yes	☐ No
Is the full financial statement for the last complete year available if requested by the committee?		
☐ Yes	☐ No	
Is this project budget incorporated into the operating budget for the current year?		
	☐ Yes	☐ No

Section B – Information on Project for Which Funding Is Requested (refer to Grant Criteria)
7. Duration:
From: YYYY/MM/DD:
To: YYYY/MM/DD:

8. Why is this project a priority for your organization? Tell us about the background. Be sure to specify whether this project will go ahead if it does not receive South Cariboo Community Enhancement Foundation funding. (max 250 words)
Included: ☐ Yes ☐ No

9. What goals do you hope to achieve through this project? (max 250 words)
Included: ☐ Yes ☐ No

10. Describe planned activities including timeline: (max 250 words)
Included: ☐ Yes ☐ No

11. Project Budget Summary

Items	Description	Cost	Amount from SCCEF	In Kind Support
Salaries/Benefits: Only those incremental salary costs pertaining to the project are eligible		\$	\$	\$
Professional Fees, Honoraria		\$	\$	\$
Office Costs: Only those incremental office costs pertaining directly to the project are eligible		\$	\$	\$
Travel		\$	NOT ELIGIBLE	\$
Publicity/Promotion: Only that pertaining directly to the project is eligible		\$	\$	\$
Capital (specify)		\$	\$	\$
Other (specify)		\$	\$	\$
		\$	\$	\$
TOTAL EXPENDITURE		\$	\$	\$

12. Project Budget Summary (continued)

REVENUE *				
Sources of Revenue	Assured	Requested from SCCEF	Total	Contact/Tel.
Organization's Contributions:	\$	\$	\$	
Other (specify)	\$	\$	\$	
Government	\$	\$	\$	
Gaming	\$	\$	\$	
Foundations	\$	\$	\$	
In Kind Donors	\$	\$	\$	
TOTAL REVENUE	\$	\$	\$	

13. Description of community involvement and collaboration with other agencies:

14. How will the project meet one or more of the goals and focus areas of the South Cariboo Community Enhancement Foundation (to review these visit our website www.sccef.org and click on Grants, click on **Applying for a Grant**):

15. How will you know if your project is successful? What information (anecdotes, statistics etc.) **will you be collecting from the beginning of the project?** (completion of an evaluation form is required for all grant recipients to receive final 10% of funding):

16. If applicable, how will you continue to fund this project?

17. a) What group of people is directly affected through this project? How may people directly benefit?

17. b) What group of people is indirectly affected through this project? How may people indirectly benefit?

18. What are the long-lasting impacts of this project on the community?

19. Please provide letters of support

Included: ☐ Yes ☐ No

** Please note: The South Cariboo Community Enhancement Foundation preference is to fund projects at a minimum of 20% and maximum of 50% of total project costs.*

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Email: info@sccef.org**

This space reserved for additional notes from the applicant: