



City of
Peterborough

City of Peterborough
Community Services Department
Community Grants Program
500 George St. North
Peterborough, ON K9H 3R9
(705) 742-7777, ext 1822
email: communitygrants@peterborough.ca

**THIS IS FOR REFERENCE ONLY, TO PROVIDE THE
QUESTIONS ON THE APPLICATION.
APPLICATIONS MUST NOW BE SUBMITTED USING THE
ONLINE FORM**

**2012 COMMUNITY PROJECT GRANT (\$250-\$1,000)
SAMPLE APPLICATION FORM**

The information provided in this application will be reviewed by a restricted number of City of Peterborough personnel. All information will remain confidential.

CONDITIONS OF GRANT

The applicant agrees to allow the City Treasurer, or his delegate, to examine any records of the applicant to ascertain that the funds granted by the City to the applicant have been properly expended for the purposes herein described.

No grant will be made retroactively to fund deficits or shortfalls. Commitments made by an applicant prior to, or in anticipation of official written notification that a grant has been approved are done at the applicant's risk. In the event that an application is rejected, the City will not be responsible for expenditures already incurred.

I/WE certify that the information in the application is true and correct, **INCLUDING FIGURES SUBMITTED ON THE FINANCIAL INFORMATION FORM.**

Authorized Signatures: _____

President/Chair

Date

In accordance with the Municipal Freedom of Information and Protection of Privacy Act, all information gathered will be used for the purpose of selection of applicants for community grants. The applicant hereby consents to disclosure of information contained in this submission, pursuant to The Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, C.M. 56. If an applicant proponent believes that all or part of the submission should be protected from release, the relevant sections should be clearly marked as confidential. This shall not automatically protect a submission from release, but shall assist the City in making a determination on release if a Freedom of Information request is made. The identity of successful applicants as well as the community grant level of funding awarded may be available to the public on the City website.

1. ORGANIZATION INFORMATION

Name and address of Group/ Organization: _____
Website if applicable: _____
Number of Years Organization has been in Operation: _____
Charitable Status Number (if applicable): _____
Not-for-Profit Incorporation Number (if applicable): _____
Contact Person's Name, Phone, fax and e-mail: _____

2. CITY FUNDING PRIORITIES (must meet 1 or more)

Check those that apply to your program/service/activity:

- Enhance and protect human health and well-being
- Preserve and protect the City's built and cultural heritage and the natural environment
- Enhance the City as a creative community by developing, promoting and providing access to arts, culture and heritage
- Enhance the City as a sports and recreational leader by promoting and providing access to physical, recreational and leisure activities
- Contribute to a sustainable local economy by forming creative partnerships within sectors, across sectors, and with the local business community

3. FUNDING STREAMS

Choose the **ONE** sector that **best** represents the organization's area of involvement:

- Arts Recreation Social Services Environment
 - Culture Sports Health
 - Heritage
- (CHECK OFF ONE BOX ONLY)**

4. PARTICIPANT PRIORITIES

Check off any groups below that are included in your organization's target population:

- People with low incomes, at risk, isolated or marginalized Youth
- Persons with Disabilities Seniors
- Neighbourhood Associations Families with Children

5. FUNDING TO BE USED FOR (select one):

- Project (a specific event or activity)
- Program (a series of related events or activities, e.g. Education Program)
- Operating (City contribution to annual operating budget)

Please respond to the following questions in the online application. There is a limit of 4000 characters per question unless otherwise stated.

6. **Organizational mandate**
Please state your group's mandate (purpose).
7. **Previous year's funding**
If your organization received a Project Grant last year, please report on project results or outcomes including the number of people who participated.
8. **Previous year's funding amount:**
9. **Number of clients previous year's project served:**
10. **Purpose of funding**
Describe how the requested funds will be used in this fiscal year.
11. **Need**
Explain how your organization's proposed activity or service will fill a need in this Community and/or impact on this Community. What percentage of your activities are within the City limits?
12. **Support**
What other Community support (funding, partnerships, in-kind, volunteers) do you have for this activity/service?
13. **Number of volunteers:**
14. **Participants**
Who is your target audience and how many clients or patrons do you expect to serve this year?
15. **Number of clients project will serve:**
16. **Evaluation**
How will you measure the success of your proposed project?
17. **Recognition**
If successful, how will you formally recognize the City's contribution?
18. **Group/ Committee/ Board Members**
Provide a list of the committee members' names, addresses, positions on the committee, and phone numbers.

FINANCIAL INFORMATION FORM

Please note: This financial statement should relate directly to the costs and revenues of the proposed project. If this project is part of a larger budget, the applicant must also provide a

copy of either the organization's full annual operating budget or, preferably, a financial statement from the last fiscal year so that the Grantor can determine eligibility.

Value of in-kind contributions can be estimated. Volunteer hours for committee work or physical work on the project can be attributed an hourly rate such as \$11/hour (suggestion) and multiplied by the hours of time donated for the duration for the project to obtain the value. Items that have been donated will also have a value. For example, 3.5 yards of compost donated to a community garden would have a value of \$115. The value of in-kind contributions is included as revenue and again as an expense.

1	Revenue	Proposed Budget	Confirmed Yes or No
2	Total funding requested from the City of Peterborough (up to 50% of total budget, not to exceed \$1,000)		
3	Federal Funding: Specify Source		
4	Provincial Funding: Specify Source		
5	Other Organizational Funding: Specify Source		
6	Trillium Funding		
7	Donations/Sponsorships		
8	Fund Raising (Total Revenues)		
9	Earned Revenue (fees charged, rental income, net GST rebate etc.)		
10	Value of In-Kind Contributions		
11	TOTAL REVENUE		
12	Expenditures		
13	Staff costs: Salaries/Benefits		
14	Administration costs: such as phone/FAX/internet, office expenses, equipment, postage		
15	Facility & Equipment costs: such as rent/mortgage, repairs & maintenance, taxes, insurances, utilities, computers, repairs, sheds, wheelbarrows, tools, etc		
16	Program costs: such as materials & supplies, printing, postage, promotion, subsidies, honorariums, artists' fees		
17	Expenses such as bank charges, interest, legal fees, dues, membership costs, audit fees, GST expense, bad debts		
18	Fund-raising expenses		
19	Travel & Professional development		
20	Value of In-Kind Expenses (should match value of In-Kind contributions)		
21	TOTAL EXPENDITURES		

Surplus/Deficit Explanation

Please use the following space to explain any of the following that apply: Reason for surplus, plan for deficit reduction, in-kind donations.