



# City of Nanaimo Social Planning Grants

## Social Response Grant Application Form (2024)

This is an application for the City of Nanaimo's Social Planning - Social Response Grant. Before completing the application form, please refer to the ***Social Planning Grant Guidelines & Criteria***.

### How to Submit your Application

Submit completed application packages **by 12:00 pm on Tuesday, November 14, 2023**

- **By Email:** [socialplanning@nanaimo.ca](mailto:socialplanning@nanaimo.ca)
- **By Mail:** c/o Community Planning, City of Nanaimo  
455 Wallace Street, Nanaimo BC V9R 5J6
- **In Person:** c/o Community Planning, City of Nanaimo Service  
& Resource Centre, 411 Dunsmuir Street, Nanaimo BC

NOTE: Late applications will not be reviewed.

For more information, please contact Community Planning  
at 250-755-4464 or [socialplanning@nanaimo.ca](mailto:socialplanning@nanaimo.ca)

**Grant Request Details**

Year: \_\_\_\_\_ Applicant: \_\_\_\_\_

Grant Amount Requested: \$ \_\_\_\_\_ Project Name: \_\_\_\_\_

**Project Focus**

Please indicate which of the following strategic priorities your project addresses:

- † **Social Equity**
- † **Community Diversity**
- † **Community Wellness**
- † **Vibrant Neighbourhoods**

**Organization Details**

Legal Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

City: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Position: \_\_\_\_\_ Email: \_\_\_\_\_

**Project Information**

**Please state the project name/title and provide a brief summary in the following space. This information may be used in public communications and on the City's website (150 words maximum).**

Does your activity take place in Nanaimo?

- † Yes
- † No

Have we funded this project before?

- † Yes - Year: \_\_\_\_\_
- † No

**Please describe in detail the project/program for which grant funding is being sought. Be sure to provide information on all aspects of its operation including: timelines, location, zoning, staffing, target market, potential programming, and community partnerships. Please provide information on the scalability of your project in case we are unable to grant you the full amount requested.**

**Project Evaluation: Please describe expected outcomes and outline how you will evaluate the project/program to capture measurable results.**

**Budget**

Attach the following information:

- † A detailed budget of the proposed project, outlining all revenues including sources and expenditures, using the attached form

Does your organization already receive (or have you applied) for other sources of City of Nanaimo funding?

† Yes

† No

† Pending Application: Grant Type: \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_

*If yes, please specify the source(s) (grant types) and dollar amount(s) (attach additional sheets if required):*

Grant Type: \_\_\_\_\_ Amount Granted: \$ \_\_\_\_\_

Grant Type: \_\_\_\_\_ Amount Granted: \$ \_\_\_\_\_

### Final Report on Previous Year Funding

† Applicants who have received funding in previous years MUST provide all final reports to the Community Planning Department within 12 months of receipt of funding. Failure to provide final reports may result in the rejection of new applications.

### Signature and Declarations

I hereby certify that the information included with this application is complete, and is true and correct to the best of my knowledge, and that I have been authorized by the Board of Directors to make this declaration and to submit this application on behalf of the above named organization.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

I hereby declare that if our organization is successful in obtaining a City of Nanaimo Social Planning Grant that we give the City of Nanaimo (or third party appointed by the City) the right to review the project/program for which the grant was obtained to ascertain whether grant monies received were used for the stated purpose(s) set out in this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

*Freedom of Information and Protection of Privacy Act Statement:* Information collected on this form, or provided with this form, is collected under the general authority of the *Community Charter* and the *Freedom of Information and Protection of Privacy Act*, and is protected in accordance with the *Act*. Personal information will only be used by authorized staff to fulfill the purpose for which it was originally collected, or for a use consistent with that purpose. For further information regarding the collection, use, or disclosure of personal information by the City of Nanaimo, please contact the Legislative Services Department at 250-755-4405.



## SOCIAL RESPONSE GRANTS

### PROJECT BUDGET:

**PROJECT REVENUE** (Please provide detailed revenue projections and indicate any revenue sources that have been confirmed)

FUNDING SOURCES	Amount \$	Confirmed (Yes/No)
<b>Social Response Grant Amount Requested</b>	\$	
<b>Other Grant Sources (please list all other grants received or presently being pursued for this project)</b>		
	\$	
	\$	
	\$	
<b>Total Grant Amounts</b>	\$	
<b>Project/Program Revenue (if any)</b>		
	\$	
	\$	
<b>Total Project/Program Revenue</b>	\$	
<b>Other Revenue Sources (e.g. Donations/Services in Kind)</b>		
	\$	
	\$	
	\$	
<b>Total Other Revenue</b>	\$	
<b>TOTAL ALL REVENUE</b>	\$	

### PROJECT EXPENSES

Expense Item:	Amount \$	Expenses City Funding Applied To
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
<b>TOTAL ALL EXPENSES</b>	\$	