



# City of Nanaimo Social Planning Grants

## Community Vitality Grant Application Form (2024)

This is an application for the City of Nanaimo's Social Planning - Community Vitality 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

In the following box, 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.

**Budget**

Attach the following information:

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





## COMMUNITY VITALITY GRANT

### 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>Community Vitality 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>	\$	