

CENTRAL COAST REGIONAL DISTRICT
POLICIES

F-17 – Application for Grant-in-Aid

Purpose: To enable the Board to allocate budgeted Grant-in-Aid funds in a consistent and fair manner by ensuring comparable consideration is given to all applications.

Eligibility: Organizations must meet the following criteria in order to be considered for a Grant-in-Aid:

1. Have a mailing address and contact representative within the Central Coast Regional District;
2. Be non-partisan, non-denominational and not for profit OR at the approval of the CCRD Board be a well-established community group;
3. Provide a service to the residents within the Regional District; and
4. Have additional funding sources other than the CCRD (i.e. other grants, donations, membership revenue, corporate donations, etc.).

Applications may be for operational or capital expenses, and recurring or one-time events.

The total value of disbursement is at the discretion of the Board of Directors but may not exceed the maximum of \$0.10 per thousand dollars of assessed property values (approximately \$15,000). The amount of individual disbursement is determined based on eligibility and the total number of applications received.

Application Process and Timeline:

December: Call for applications

February 1 OR first business day in February: Applications due

February: Eligible and complete applications presented to CCRD Board at February Regular Meeting for consideration and final decision

After March 31: Applicants advised in writing of whether or not their proposal is approved for funding

August: Funds disbursed to successful applicants

December 31 OR last business day in December: Deadline for funding report

Incomplete or late applications will not be considered. Please use the checklist to ensure you are submitting all the required information. If you require funds to be disbursed sooner than August, please include a note in your application.

Once the final decision is made by the Board of Directors, the CAO or designate will administer disbursements.

Reports for successful applicants should follow the Appendix C – Report on Grant-in-Aid Funding template. The CCRD reserves the right to request that unspent funds be returned. Failure to report on time without prior written consent from the CCRD may result in revocation of funds and/or ineligibility for future funding.

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DISCLAIMER:

The Regional District will not provide assistance in contravention of s. 236(1)(c) of the *Local Government Act*. Furthermore, the Regional District does not intend to replace the financial responsibilities of senior levels of government, other governments or government agencies and affiliates, or to replace primary funding opportunities such as grants offered by senior levels of government.

Please submit applications to:

Administrative Assistant
Central Coast Regional District
PO Box 186
626 Cliff Street
Bella Coola, BC V0T 1C0

info@ccrd.ca

Date: December 11, 2014 - Resolution 14-12-43
Amended: November 13, 2015 – Resolution 15-11-28
Amended: November 10, 2016 – Resolution 16-11-20
Amended: December 12, 2019

December 12, 2019

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Please ensure the following are included in your Grant-in-Aid application. Incomplete applications will not be considered. Please include this checklist with your application.

- A completed and signed application form (Appendix B);
- The budget and detailed cost estimates, revenues and expenses (if the application is for a project based initiative only the budget for the project is required);
- A copy of your organizations most recent financial statements, including an income statement and balance sheet OR, if applying for less than \$500, a written financial report for the previous year;
- A description of your organizations mandate, mission, and objectives; and
- A list of key dates and/or milestones for the initiative.

We typically receive more applications in a given year than we have the budget to fund. Competitive applications will demonstrate alignment with some or all of the following priorities:

- Promote volunteer participation and engagement.
- Promote a healthy lifestyle through sport, recreation, leisure, and/or social opportunities.
- Celebrate community pride and diverse heritage and culture through art, festivals, and/or events.
- Meet the needs of the community by using new approaches and techniques.
- Exercise coordination, cooperation, and collaboration with other groups to prevent duplication of projects, programs, services, or events.
- Adhere to the CCRD Integrated Strategic Plan 2019-2022.
- Provide a service that meets a community need.

Please briefly demonstrate how the above priorities will be achieved.

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F-17 APPLICATION FOR GRANT-IN-AID FUNDS – APPENDIX B

Name of Organization: _____
 Name of Contact Person: _____ Position: _____
 Mailing Address: _____
 Phone #: _____ Email: _____
 Are you a: (Yes/No) Society _____ Charity _____ Corporation/Company _____ Other _____
 Registration Date: _____ Registration # _____
 (Note: Registration date and number are only required if the application is for more than \$500.)

Proposed use of funds (select one):

- Operational Funding (not to exceed 50% of annual operating budget)
- Capital Expenditure
- Events – recurring
- Events – one-time

Source Name	Cash requested from CCRD	Your in-kind (\$ value) contributed	Confirmed		% of Total initiative
			Cash	In-Kind	
Your organization					
CCRD					
Total					100%

Has your organization received CCRD Grant-in-Aid funding support in the past 3 years? (Y / N)
 If yes, please list the project/initiative title, year, and amount received below.

Are CCRD Grant-in-Aid funds being used to leverage other funding applications? (Y / N)
 Are you aware of other foundations, funding organizations, or government programs that align with your organizations mandate, mission, and objectives? _____
 Identify the Electoral Area(s) that directly benefit from your application _____

 Date Signature

 (Please print name) Position

Please submit applications to:
 Administrative Assistant
 Central Coast Regional District
 PO Box 186
 626 Cliff Street
 Bella Coola, BC V0T1C0
 info@ccrd.ca

**CENTRAL COAST REGIONAL DISTRICT
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F-17 Application for Grant-In-Aid – APPENDIX C

**REPORT ON GRANT-IN-AID FUNDING
Due on or before last working day of December of current year**

Name of Organization	
Mailing Address	
Name of Contact Person (Position)	
Email Address	
Total Amount Received from the CCRD	
Please attach copies of invoices(s) if funds were for a project or capital expenditure.	
<input type="checkbox"/> Attached	
Please provide the following information on separate sheets of paper. Responses should be numbered as listed below.	
<ol style="list-style-type: none">1. A descriptive narrative summary of activities undertaken;2. An evaluation of the benefits received by the community with regards to the initiative that was undertaken;3. A statement of actual revenue and expenses (clearly identifying how the CCRD funds were used)	

Mail to: Central Coast Regional District
Box 186, Bella Coola, BC V0T 1C0
Or Email to: info@ccrd.ca

December 12, 2019
