



GRANTS-IN-AID APPLICATION FORM

Instructions: please download a copy of the application to your computer, save, and complete. To make changes, you always need to open the document from Adobe or equivalent PDF Viewer. Please refer to the [CRD Grants-in-Aid website](#) for intake information. Applications should be submitted to: ssiadmin@crd.bc.ca (SSI) OR jdfinfo@crd.bc.ca (JdF) OR mpender@crd.bc.ca (SGI)

SECTION 1. APPLICANT INFORMATION

1. Organization Legal Name:
2. Mailing Address:
3. Electoral Area:
4. Primary Contact:
Must be an Authorized Signatory
5. Title:
6. Email:
7. Phone Number:
8. Organization is a Registered Society:
9. Organization is Voluntary and Nonprofit:
10. Business Number:
11. Organization Description:
Benefits/services offered, geographic area served, size of organization, etc.

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SECTION 3. PROJECT FINANCIALS

a. Basic Project Budget:

Optional: Attach a separate full budget to your application.

Expenses:	
Equipment Purchase	\$
Honorarium	\$
Food	\$
Travel	\$
Equipment Rental	\$
Venue Rental	\$
Other Rental (Please specify):	\$
Professional Fees	\$
Administrative Fees	\$
Staff Costs	\$
Construction Costs:	\$
Other (Please specify):	\$
Other (Please specify):	\$
Other (Please specify):	\$
Other (Please specify):	\$
Other (Please specify):	\$
Total Project Cost:	\$

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b. Grants-in-Aid Funding Request & Other Sources of Funding:

Place your funding request in the highlighted box, this is the amount of funding being requested in this application.

Grants-in-Aid Request	\$
Other Funding Sources (E.g. Other Grants, Debt, Donations, Reserves):	
	\$
	\$
	\$
	\$
	\$
Total Project Funding:	\$

c. Previous CRD Financial Assistance:

Please disclose if your organization has received assistance (Grants-In-Aid, Arts Grants, Waiving of fees, ect.) from the CRD in the past 5 years.

Source	Purpose	Year	Amount (\$)
		Total:	

SECTION 4. DOCUMENTATION CHECKLIST

Please ensure the following documents have been completed and attached:

- Financial Statements
For new organizations that lack statements, an annual budget is acceptable.
- Associated Project Documents (As Applicable)

SECTION 6. ATTESTATIONS

1. I confirm that I am a Signing Authority for the applicant organization and have the authority to enter into binding agreements on its behalf. I further confirm that I have reviewed this application, that the information provided is true and accurate, and that the application complies with all of the following requirements:
 - a. This application is not being made on behalf of an industrial, commercial or business undertaking.
 - b. This proposed project is not for the direct personal benefit of any individual, proprietor, member or shareholder.
 - c. The applicant organization is voluntary and non-profit.
2. If this project is approved for funding in any amount, the applicant organization agrees to the following terms:
 - a. The organization will complete the project as described in this application.
 - b. The organization will acknowledge the CRD's financial support in all project-related materials, activities and events.
 - c. If the project cannot be completed as described in this application, the organization agrees to return all funds immediately.
 - d. The organization will submit a final report within 60 days of project completion.
 - e. The organization will immediately return any unspent funds or funds for any expenses deemed ineligible by the CRD.
 - f. The organization will comply and adhere with all applicable laws, licensing, required permits and approval of funding does not constitute approval under any other program or legislation.
 - g. The organization acknowledges that funding does not imply endorsement by the CRD of the project, the application organization, or its views or activities.

Name	Signature*	Title	Date

*Electronic or physical signature is acceptable.