

Qalipu First Nation Community Support Program Application

Name of Applicant/Organization: _____		Application Date: _____
Mailing Address: _____	Contact Information: Contact Person: _____ Title: _____ Phone number: _____ Fax number: _____ Email: _____	
Location of Activity (Community) Does the Activity include Qalipu First Nation members from one or more wards? _____ <div style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</div> If yes, Explain which wards and the level of involvement? 		
Are you incorporated as a non-profit organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is your Incorporation Number? _____		
Are you listed with the Canada Revenue Agency as a Registered Charity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is your Registration Number? _____		
How many active volunteers and paid staff are involved in assisting your group or organization?		
Volunteers: _____	Full -Time Staff: _____	Part -Time Staff: _____
<p>Please indicate the program component that applies primarily to your project. All applications must be received 6 weeks in advance, unless indicated otherwise.</p> <p><input type="checkbox"/> Powwow <input type="checkbox"/> Mawi'omi</p> <p><i>Funding is available for \$1,000 for a one day event and \$2,500 for a two day event.</i></p>		
<p>Please indicate the percentage of grant requested upfront.</p> <p><input type="checkbox"/> Fifty percent (50%) <input type="checkbox"/> We request _____% (must be between 51% and 75%). Please attached a letter of reasons to application and proposal. <input type="checkbox"/> Advanced payment is not necessary.</p> <p><i>The balance of grant will be issued upon meeting the post event requirements.</i></p>		

Please attach the following:

1. Proposal with narrative: Brief background of your organization, description and objectives of project, including a work plan and timeline. Clearly state who the project is aimed at and how it will contribute to the safeguarding of your cultural heritage, number of participants anticipated. Detailed budget breakdown. Brief description on how the QFN will be recognized for providing financial contribution. Indicate how the project will be evaluated
2. Confirmation Letters of all other funding sources, along with any in-kind contributions.
3. Any letters of support from community organizations or other partners

Note: A follow up report must be forwarded to Qalipu First Nation within 30 days after the event has been completed to qualify for future funding.

Total estimated cost of your proposal: QFN Funding Requested:

Applicant's Declaration

To Qalipu First Nation (QFN):

- a) I confirm that the information given in this application is, to the best of my knowledge and ability, complete, true and correct.
- b) I will provide all information required by QFN to complete the assessment of this project and I authorize QFN to make any inquiries of such persons, firms, corporations or other government agencies as it deems necessary in order to reach a decision on this application.
- c) I will instruct the existing lenders, as indicated above, to provide QFN with full information concerning my (the applicant's) operating and financial position. I further authorize QFN to discuss fully my (the applicant's) affairs with the funding partners and credit agencies and other potential contributors regarding this application.
- d) If approved, I understand that I will be responsible for the following: Executive summary, evaluation summary, original receipts, the returned of any unused funds made out to Qalipu First Nation in the form of a cheque.

Name of Signing Officer

Signature

Date

Name of Signing Officer

Signature

Date

Please submit application to:

Qalipu First Nation
Culture, Tourism, and Community Development Department,
3 Church Street, Corner Brook, NL A2H 2Z4
Tel: 709-651-7668
Email: arobbins@qalipu.ca

Faxed applications will not be accepted.

Any personal information collected or provided as part of the application process will only be used for purposes relating to the operation of the relevant funding programs and for statistical reports. All information will be kept confidential and will not be disclosed to third parties without your consent unless required or authorized by law. Any questions or comments regarding privacy issues can be directed to Terri Humphries, Manager of Culture and Community Outreach, Qalipu First Nation Band, 709-651-7668