**Dundas Community Fund Application Form**

**SUBMITTED BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE SUBMITTED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS OF**

**SUBMITTING PARTY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **DESCRIPTION (State what your charity/company/project does)**

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1. **STATEMENT OF NEED (What is needed/lacking and why? What would be the consequences of not receiving this grant/monterary assistance)**

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1. **GOALS & OBJECTIVES (What is hoped to be achieved with this grant initially and also in the longer term, e.g. 5 years from now. Vision for the community and yourself)**

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1. **SUSTAINABILITY (How do you propose to sustain the venture if you were given the grant – *if applicable)***

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1. **ROUGH PROGRAMME SKELETON OUTLINE & METHODS TO HELP IMPLEMENT ITS SUCCESS**

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1. **STAFF & ORGANISATIONAL INFORMATION (if applicable)**

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| NAME & TITLE (staff) | EXPENSES |
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**Where is your business**

**located?**

1. **Identify the demographics of the participants and/or beneficiaries. *Select all that apply***

* Female
* Male
* Non-Binary/Trans
* From a low socio-economic background
* Ethnic minority
* Prefer not to say
* Community Volunteers
* Elderly citizens
* Children
* Secondary school students
* Post-secondary students
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Identify any of the following characteristics that may apply to the participants and/or beneficiaries. *Select all that apply.***

* Living in poverty
* Single parents
* Unemployed/underemployed
* Has a disability (mental/physical)
* LGBTTTQA
* Mental illness
* Chronic health condition
* Women owned/run business
* Vulnerable/at-risk
* Isolated socially/geographically
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Which of the following focus areas will be involved in the project/business? *Select any/all that apply).***

Arts and culture Crime Reduction

Health and wellness Social inclusion and social supports

Housing supports Research

Public awareness/education Aging independence

Sports and recreation Commercial

Nutrition/food

Coping skills

1. **Contact number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**