**TATLA RESOURCE ASSOCIATION**

**PROJECT FUNDING APPLICATION**

Before filling in this application, please refer to the *TRA Project Funding Application Guide*.

1. **Project Name**

|  |
| --- |
| Provide a name for the project that is proposed in this funding application: |
|  |

1. **Applicant Profile**

|  |  |
| --- | --- |
| Applicant name(s)\*: | Organization (if applicable): |
|  |  |
| Address: |
|  |
| Telephone: | Fax: |
|  |  |
| Email: | Website (if applicable): |
|  |  |

\* If more than one applicant, please indicate primary contact person.

1. **Governance Information**

 If your application is for an organization/society please provide additional governance information with this application.

* legal name of organization
* year organization was established
* proof of organization type and status
* names of organization Board of Directors
* copy of BC Registration, Constitution and Bylaws.
1. **Project Overview**

|  |
| --- |
| Identify the project’s primary areas of focus (please check all that apply): |
| ☐ Community Forest | ☐ Environmental Stewardship |
| ☐ Recreation | ☐ Community Infrastructure |
| ☐ Education | ☐ Energy |
| ☐ Health & Wellness | ☐ Economic Development |
| ☐ Community Building | ☐ Tourism |
| ☐ Sustainable Food System | ☐ Other (please specify): |

|  |
| --- |
| Provide details of how the proposed project addresses the primary areas of focus. *Refer to the TRA Vision Document for an explanation of each area of focus.* |
|  |

|  |
| --- |
| Provide a description of the project: (What do you want to do?): |
|  |
| Please indicate the key project deliverables: |
|  |
| Explain the rationale for the project: (Why are you doing it?): |
|  |
| Why do you think there is a need of this service/project in our community? |
|  |
| Give an estimate of the number and demographic profile of people this project will benefit. How will individuals benefit from the proposed project activity.  |
|  |

1. **Sustainability Impacts**

|  |
| --- |
| Outline the environmental benefits of the project: |
|  |
| Outline the social benefits of the project: |
|  |
| Outline the economic benefits of the project:  |
|  |

1. **Employment Impacts**

Will the project impact employment in the Tatla area? (Please check the appropriate box)

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

If you answered Yes, please indicate the impacts on the chart below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Nature of Positions | # of new positions to be created | Hours of Employment per week | Expected Duration of Employment | Position(s) Title(s) |
| Permanent full-time jobs (35+ hours per week) |  |  |  |  |
| Permanent part time jobs (less than 35 hours per week) |  |   |  |  |
| Seasonal jobs |  |   |   |  |
| Temporary jobs (eg. construction or consulting) |  |   |   |  |

1. **Project Involvement**

Please list all participants and their roles in the project:

|  |  |
| --- | --- |
| Communities |  |
| First Nations Communities |  |
| Private Businesses |  |
| Non-profit organizations |  |
| Government organizations |  |
| Other (please indicate) |   |

1. **Community Impacts**

|  |
| --- |
| How will the project maintain itself in terms of future operating costs, staffing needs, maintenance, etc.?  |
|  |
| What effect will the project have on population growth of our area, if any? Please describe.  |
|  |
| Describe in detail how the project will enhance our community. |
|  |
| How will the project impact existing businesses? |
|  |
| Does the project take the community closer to the TRA’s vision? |
|  |
| Does this project require additional funds to be sustainable in the long term? |
|  |

**If the proposed project involves construction or renovation activities, does your organization own the building or land relating to the proposed project?**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

**If yes, provide proof of ownership or lease agreement.**

1. **Project Milestones**

If your project requires funding that will extend beyond a one-year period please provided a detail description of why this necessary.

|  |  |  |
| --- | --- | --- |
| Stage of project:  | Scheduled date: (dd-mmm-yyyy) | Describe the current stage of the project  |
| 1. Project start date |  |  |
| 2.  |  |  |
| 3.  |  |  |
| 4. |  |  |
| 5. |  |  |
| 6. |  |  |
| 7. |  |  |
| 8. Project completion date |  |  |
| Description of need for extended completion date beyond one year. |  |  |

1. **Project Budget**

Please note: if shortlisted, a proposal for a minor capital project or a capital

acquisition exceeding $5000 will be required to provide additional budget information including professional quotes for each activity.

|  |  |  |
| --- | --- | --- |
| Expense Item | Amount ($): | Indicate if quote is attached |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL PROJECT BUDGET** | $ |  |

**11. Personnel**

|  |
| --- |
| List the personnel who will be involved in the project and their relevant qualifications and experience: |
|  |

**12. Funding Request**

The following funding is requested from the Tatla Resource Association

|  |  |
| --- | --- |
| Funding type: | Amount ($): |
| Grant | $  | Indicate total project funding required. Please note: projects may be *partially* funded.  |

**13. Other Funding Sources**

|  |
| --- |
| Outline any other confirmed funding for the project. Attach proof of confirmed funds. |
| Funding source | Amount ($) | Terms (grant, loan, etc.) | Has this funding been confirmed?  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**14. In-Kind Contributions**

|  |  |  |
| --- | --- | --- |
| In-kind Contribution | Value of In-kind contribution ($) | Has this donation been confirmed? (please indicate yes or no) |
|  |  |  |
|  |  |  |
|  |  |  |

**Will you still be able to complete the project if no other funds are received for which you have applied.**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

|  |
| --- |
| **Please describe the impact of this application if approved for an amount, less than requested.** |
|  |

**.**

**15. Attachments**

List all documents attached to this application (including detailed quotes):

|  |
| --- |
| Document name: |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| 6. |
| 7. |
| 8. |

**16. Authorization**

I affirm that the information in this application is accurate and complete, and that the project proposal, including budget and plans are fairly presented. I agree that once the funding is approved any changes to the project proposal will require prior approval of the TRA.

I also agree to submit reporting material as required by the TRA and where required, financial accounting for evaluation of the project funded by TRA. I understand that the information provided in this application may be accessible under the Freedom of Information (FOI) Act.

I agree to publicly acknowledge funding and assistance by the TRA.

I authorize the TRA to make any enquiries for such persons, firms, corporations and governments/agencies and non-profit organizations operating in my organization’s field of activities. The findings may be collected and shared as the TRA deems necessary, in order to reach a decision on this application and to administer and monitor the implementation of the project and to evaluate results after project completion.

I agree the information provided in this application form may be shared with the TRA Board and appropriate TRA committees.

|  |
| --- |
| Name (please print): |
| Signature: |
| Title: |
| Date: |