# Grant Application Template
## Child Care Capital Grants

*Please use this template only to draft your answers offline, so that your work will be saved for your own records, and/or in the event that you encounter a technical issue when using the online grant system.*

***Do not upload this document as your application.*** *You must <mark>copy</mark>-and-paste your answers into the individual spaces provided in the online grant system for your application to be submitted.*

**Application Questions for:**

## Step 1: Applicant Contacts

The following section includes questions about the Society.

Society Name
*[Information Auto-Generated]*

Society Number
*[Information Auto-Generated]*

Charitable Number (OPTIONAL)

|  |
|--|

Society Website (OPTIONAL)

|  |
|--|

**Contact:**

Please enter this information carefully. We will use it in future correspondence with you.

First Name

|  |
|--|

Last Name

|  |
|--|

Title

|  |
|--|

Address

|  |
|--|

City

|  |
|--|

Province

|  |
|--|

Country

Postal Code

Phone No

Email

## Step 2: Applicant Information

The following section includes general questions about your Society. For assistance in filling out this section of the form, please refer to the Grant Program Guidelines.

**Application Qualifications:**

Tell us about your organization. (e.x., history, vision and mandate)

Additional Information *(optional)*

| Choose File | | Add File |

Describe Programs and Services provided in the past 5 years:

Do you provide licensed child care programs?
○ Yes          ○ No

Please complete Licensed Capacity and Current Enrolment Form for the type and number of child care spaces your Society provides and your current enrolment for each program using information on your Child Care License(s) and upload below.

Licensed Capacity & Current Enrolment by Program Type Template.

**Supporting Documents:**

Attach a copy of your Society's Provincial Child Care License(s), (Required if you deliver licensed child care)

| Choose File | | Add File |
|---|---|---|

Upload your completed Licensed Capacity and Current Enrolment form (Required if you deliver licensed child care)

| Choose File | | Add File |
|---|---|---|

Attach the Child Care Program's Operating Budget for the Current Fiscal Year:

| Choose File | | Add File |
|---|---|---|

Attach a list of the Board of Directors, Officers, and Executive Directors of the Society, including their addresses and contact information:

| Choose File | | Add File |
|---|---|---|

Attach Minutes of the Most Recent Annual General Meeting:

| Choose File | | Add File |
|---|---|---|

Attach Last Year's Financial Statements or Audited Statement including balance sheet for recently completed fiscal year, including the auditors' report signed by external auditors, or see the Grant Program Guidelines.

| Choose File |
|---|

| Add File |
|---|

If you did not attach the Audit Report or Audit Review Report, please explain why:

[            ]

## Step 3: Grant Program

**Grant Description:**

Amount Requested:

[            ]

**Proposed Project Budget:**

Proposal Title:

[            ]

Purpose of the Grant
- ○ Equipment
- ○ Furnishings
- ○ Playground Improvements
- ○ Other

[            ]

Describe in detail the purpose of the grant, what will it be used for:

[            ]

Describe how these funds will be used to enhance child care service delivery (e.g. improve quality, availability, inclusion or accessibility)?

[            ]

Describe how this request aligns with current City priorities as outlines in Program Guidelines (Appendix A)

[            ]

Describe who will benefit from the grant, if received, including the numbers of children, families and/or staff impacted:

[            ]

Do you have any other funders or partners who will be assisting with this capital project?
○ Yes          ○ No
If yes, please list the partners and their role.

[            ]

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**Proposed Project Budget Summary** (please list the 'preferred/lower cost' items from your Proposed Project Budget form and include all sources of revenue including the requested child care grant funds)

| Expenses | |
|---|---|
| Item/Activity | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| **Total Expenses** | |

| Revenue | |
|---|---|
| Item/Activity | |
| | |
| | |
| | |
| **Total Revenue** | |
| **Surplus/*(Deficit)*** | |

Comments (optional): (max. 4000 characters)

|  |
|---|
|  |

**Proposed Project Timeline**

*Note City grant funding, if approved, is historically available by April 1.

Start Date:

|  |
|---|

Completion Date:

|  |
|---|

**Supporting Documents**

Attach the completed Proposed Project Budget Form outlining the  itemized budget identifying two quotes prices for how grant funds will be used (Required):

| Choose File | | Add File |
|---|---|---|

Attach supporting information and two quotes for all projected costs (Required):

| Choose File | | Add File |
|---|---|---|

What additional sources of funding or contributions will be used to complete the proposed grant project? Outline below:

Attach the timeline for completing the project and using the grant funds:

| Choose File | | Add File |
|---|---|---|

Attach supporting documentation demonstrating need for the grant funds:

| Choose File | | Add File |
|---|---|---|

Attach letters of support, minimum of two required (please note letters from Society staff do not apply):

| Choose File | | Add File |
|---|---|---|

## Step 4: Signing Officers

Signatures of two signing officers of the Board of Directors are required to verify the accuracy of the application, to accept the terms and conditions, and to represent the Society's endorsement of this grant application. For assistance in filling out this section of the form, please refer to the Grant Program Guidelines.

Attach Completed Signature Form (Download Signature Form)

| Choose File | | Add File |
|---|---|---|

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**Definitions**

Throughout these Terms and Conditions the following terms will have the following meanings:
- APPLICANT means the organization applying for City of Richmond funding
- CAPITAL means an award for the purposes of funding a capital project
- CITY means City of Richmond
- FUNDS means a dollar amount awarded by the City of Richmond
- RECIPIENT means a successful APPLICANT who receives a dollar amount awarded by the City of Richmond
- FUNDS must be used within one year of receipt by the RECIPIENT.

Any APPLICANT who has been awarded FUNDS previously by the CITY must submit a report documenting use of those FUNDS and describing the benefits received before their current application can be considered.

Any award RECIPIENT must include the City of Richmond logo on any newsletter or publicity generated by the grant recipient.

Any RECIPIENT of CAPITAL FUNDS must obtain any and all required City permits for their capital project.

Any RECIPIENT of CAPITAL FUNDS must submit a photograph of their completed capital project and receipts with the Grant Use Report.

**Reporting and Acknowledgement of Grant Benefits**

- Those receiving a grant must provide an end of grant use report either one year following the receipt of the grant, or, if applying again, at the time that the new application is made.
- Mid-year progress and financial reports may be requested from those seeking annual grants.
- City support is to be acknowledged in all information and publicity materials pertaining to the funded activities. To receive an electronic copy of the City's logo, please contact staff at citygrants@richmond.ca.

**Recuperation of Grant**

If the grant is not used for the stated purpose, the full amount must be returned to the City.

**No Appeal**

Due to the high number of applications for limited funding, and since applicants may apply again the following year, there is no appeal of Council's decision.

Do you accept these terms and conditions?
○ Yes          ○ No