

Funds permitting, Community Impact Grants are available twice a year for tangible assets that will help registered charitable and non-profit organizations build a stronger community. **Eligible assets are those assets that are necessary to facilitate ongoing operations or to improve upon** <u>existing programs and</u> <u>services</u>. These one-time grants are for specific projects or services, and for tangible assets that will continuously provide an impact and fulfill the need outlined in this application.

Please note the following examples that are <u>not</u> eligible for grants: staff salaries, ongoing operational expenses, facility rentals, craft supplies, food, deficit funding, event sponsorship, marketing materials, fundraising events, projects that duplicate services, and flow through funding (e.g. a project that intends to fund a third party). A few examples of grant requests that may be eligible are: computers, equipment and supplies, program administrative supplies and capital assets.

#### NOTE: Non-profit organizations without a Canadian Charitable Registration Number require a Sponsor Agreement from a registered charity in order to receive funding support. Contact us for details prior to completing an application.

Please ensure that this application is completed in its entirety. Due to the number of applications received, there may not be time to follow up on outstanding documents that should have been included in the original application package. If you are not sure you have the proper documents please contact us at least one week before the deadline to discuss your application.

It is important that your application is completely legible and easy to understand. For this reason, we ask that you don't use acronyms or wording that would not be easily understood by someone outside of your organization. Please review and correct typos, spelling mistakes and autocorrecting mistakes. These can distract from the quality of your application. It is preferred that the document is typed, as handwritten applications are often difficult to read and don't photocopy as well as a typed document. United Way of Colchester County reserves the right to discard any application that is not legible.

#### Your application must be received by the United Way of Colchester County on or before 4:00pm on Friday, May 7, 2021.

If you have any questions or need additional information, please contact: *Heather Hamilton, Community Outreach Coordinator* United Way of Colchester County The United Way of Colchester County's Community Investment Committee reviews all applications and presents their recommendations to the Board of Directors for final approval. Please note that all Board decisions are final. Applicants will be contacted regarding the outcome of their application within 60 days of the application deadline. Once your project is complete, you will be required to verify that the funds were used for the purpose as specified in your application. In addition, you may be asked to provide statistical data of outcomes and expected results for the project.

# NOTE: Your grant application will not be reviewed until we have received an original signed paper copy and an electronic copy by email as follows:

- One (1) copy of the completed application and one (1) copy of all supporting documentation to the following email address: coordinator@colchester.unitedway.ca
- One (1) signed original paper copy of the application and one (1) paper copy of all supporting documentation to 90 Esplanade, Suite 2, Truro NS B2N 2K3

#### All hard copies are to be delivered to:

United Way of Colchester County			
90 Esplanade Street, Suite 2	OR	PO Box 32	
Truro NS B2N 2K3		Truro NS B2N 5B6	

#### APPLICATION DEADLINE IS 4PM ON FRIDAY, MAY 7, 2021

#### I. ORGANIZATION INFORMATION

Organization Name	
(include sponsor name if applicable)	
Full Mailing Address	
Charitable Registration Number	
(or that of your sponsoring organization)	
Public Phone Number	Project Contact's Phone Number
Project Contact Name	Position within the Organization
Contact's Email Address	Organization Website
Total Amount of Funding Requested	Date of Application
This should equal the amount in the budget – Item (I) \$	
Organization Description/Mission	
If you have previously received an Impact Grant from the amount and purpose	United Way of Colchester County, provide the date,

# II. UNITED WAY OF COLCHESTER COUNTY AND YOUR PROJECT/PROGRAM

United Way invests its funding resources in projects and programs that impact key issues in Colchester County, supporting collaborative work that makes a measureable difference in the local community.

#### Please select all of the following focus areas that reflect your project/program:

From poverty to possibility
Moving people out of poverty
Meeting basic human needs (e.g. food, shelter, jobs)
Healthy people, strong communities
Improving access to social and health related support services
Supporting resident and community engagement
Supporting community integration and settlement
All that kids can be
Improving access to early childhood learning and development programs
Helping kids do well in school and complete high school
Making the healthy transition into adulthood and post-secondary education
SUPPORTING DOCUMENTATION
All supporting documentation must be included with your application or it will not be processed. Please check off all documents that you have included.
Current Board of Directors list, identifying their position held on the board
Most recent year-to-date financial statements (income statement and balance sheet), reviewed by the organizations' Board of Directors.
Most recent <b>year-end</b> Audited Financial Statements or Review Engagement prepared by a Chartered Professional Accountant (include the entire report) or, in the absence of that, the most recent <b>year-end</b> Balance Sheet and Income Statement that has been prepared by an individual or company with an accounting background and reviewed by the Board. Note that acceptance of these statements is subject to approval by the United Way Board of Directors. <i>NOTE: All applications over \$3,000 will require Audited or Review Engagement Statements</i> .
Completed Budget (see attached template)
Copies of quotes for project assets – see Section VII of application
If required, research on community need for project/program
Other information that may support the application (optional)

III.

# IV. **PROJECT INFORMATION**

#### Project Name \_\_\_\_\_\_

**Project Description** Describe how this project builds upon the capacities of residents and what issue you are addressing within the local community ("community" may be defined as a geographic area, a population, or a group). Clearly describe the goals and objectives your organization hopes to achieve through this project. As an example, ABC non-profit is currently working with high risk teenagers living in X village. The program's objective is to build up youths' confidence and self-esteem, as well as teach them essential skills that will help them improve their lives and obtain employment.

Indicate which of the following describes how the assets will support your organization:

\_\_\_\_ Assets purchased will support existing programs and/or services

\_\_\_\_ Assets purchased will support ongoing operations

\_\_\_\_ Both of the above

**Provide a detailed description of how you will use the funding dollars.** For example: ABC non-profit will purchase five laptops to teach youth basic computer skills that can translate to employment skills.

**How many individuals will benefit from this program/project? How did you determine this figure?** For example: With a waiting list of over 50 people, the addition of 5 new laptops will enable us to provide additional services to 30 additional clients per month.

Within what timeframe do you expect the new assets to begin to impact operations, programs or services?

How do you know this initiative is important to the community? Identify the specific need and target audience/demographic in the community that your agency is addressing through this project. What research has been done to support these findings? Outline the information that was gathered to determine that this project is needed in the community. Please include research with your application. For example, due to recent trends reported in 123 survey, \_\_\_% of youth living in low income families will not have the necessary skills to obtain summer employment. In addition, recent results from the Y chamber of commerce show that small businesses need additional employees with computer skills.

# V. OUTCOMES OF YOUR PROJECT

To determine the success of your project, each project must have evaluation systems in place that will capture measurements and outcomes. An outcome is the measurable benefit or change which an individual or community experiences as a result of a program. Outcomes generally relate to changes in skill, knowledge, attitudes or behaviours.

Evaluations or Measurements are the specific items of information that are tracked to measure how well a program is achieving a specific outcome (e.g. participant attendance). They describe observable, measurable characteristics or changes that represent the achievement of an outcome.

#### Identify how this project will be evaluated (e.g. surveys, interviews, number of participants).

**How will program participants benefit from your program/project's outcomes?** An outcome is the final results of your program. An immediate outcome might be: through the ABC program, 25 youth will increase their computers skills by 30%. This will be measured through entrance and exit surveys in the program. An example of a long-term outcome would be 15 of the 30 youth obtained employment within a year due, in part, to the skills learned through our program.

**How will the community benefit from your program's outcomes?** This is the overall benefits to the entire community (e.g. by increasing the skill levels of at risk youth, we are reducing the amount of potential youth criminal activity and increasing the amount of employable youth in our area).

# VI. COMMUNITY PARTNERS/COLLABORATION OPPORTUNITIES

United Way of Colchester County believes in mobilizing collective action and inspiring people to come together to make a lasting difference in Colchester County. Please identify current organizations involved in this project and other organizations that could potentially collaborate on this project and what their roles would be.

Volunteers can be vital for non-profits to ensure a project succeeds. Please indicate the projected number of volunteers you envision being involved and their roles in the project.

# VII. FINANCIAL INFORMATION

Please complete the attached Impact Grant budget template for the proposed project.

- For individual items costing less than \$500, include one quote, printout from websites or copies of other information used to determine costs
- For individual items costing \$500 or more, three (3) full quotes are required

In your budget, include all potential and confirmed funds from your organization, other agencies and what you hope to secure through this application to the United Way of Colchester County and how these funds would be allocated to each expense.

In the budget template, please list items in order of priority for your agency, starting with the most needed.

What % of HST is your agency eligible for rebate from CRA? \_\_\_\_\_

Impact Grant Requested Amount – Insert the Budget amount - Item (I) \$\_\_\_\_\_\_

### VIII. UNITED WAY RECOGNITION

**Describe how the United Way of Colchester County will be recognized for their support of this program/project** (e.g. signage at the organization or on purchased items, marketing materials, collaborative media opportunities for the project, social media recognition).

# IX. APPLICANT SIGNATURES

Organization Board Chair	Date
printed name	signature
Program/Project Coordinator	Date
printed name	signature

# Application Deadline is 4pm on Friday, May 7 2021