

Schedule A: COMMUNITY INVESTMENT OPERATING GRANT APPLICATION

Instructions:

- Use this cover sheet as the first page of your application.
- Please submit all documents from the application checklist prior to the annual submission deadline for Annual Operating Grants.
- Incomplete submissions may disqualify your request for funding.
- If you do not have enough space to answer a question, please attach a separate sheet.
- Please forward completed application to:

Harvey Rural Community
Attn: CAO
58 Hanselacker Rd
Harvey Station, NB E6K 1A3
Email: admin@harveyruralcommunity.ca

APPLICATION CHECKLIST

Organization Name: _____

- Your Harvey Rural Community **Operating Grant Application** delivered in person, mailed, emailed or faxed.
- Proof of current registration as a non-profit or charitable organization, if applicable.** Include a copy of current Charitable Registration Number from Canada Revenue Agency. If your organization is in the process of applying for registration, please include a copy of your application.
- For requests over \$5,000, the most recent **financial statement** for your group/organization (showing all revenue and expenses).
- The **current operating budget** for your group/organization (showing all revenue and expenses). A
- report of the activities during the previous year** (Annual Report) for your group/organization.
- The organization has a Volunteer board of directors.
- This organization has been in operation for more than one year.

PART B: APPLICANT ORGANIZATION INFORMATION

All applications will be evaluated based on the information provided in this application.

1. Briefly describe your organization’s mandate/objectives.

2. Describe the community, area and/or group(s) your organization serves.

PART C: DETAILS OF SUPPORT BEING REQUESTED

3. Requested amount of funding. \$ _____

4. What type of expenses will the Community Investment be put towards? (Select one)

- Programming and Operational Support (power bill, insurance, maintenance, programming, etc.) – Specify the Operating expense type: _____
COMPLETE PART D ONLY
- Project costs (construction, renovations, events, etc.) – **COMPLETE PARTS D AND E**

PART D: ORGANIZATION’S FISCAL REQUIREMENTS

All applications will be evaluated based on the information provided in this application.

5. Does your organization generate revenue and raise funds (fundraising activities, charge admission to events/programs, membership dues, apply for grants, etc.)? if so, provide details and amounts.

6. Provide details of partnerships with local businesses. (businesses who cover some costs, advertise your events, etc.)

7. What types of programs does your organization offer, and how often are they held?

Youth and Seniors:
Sport & Recreation:
Musical and Cultural Events:
Community Celebrations and Events:
Tourism:
Other:

8. How many volunteers are in your organization, and approximately how many hours per month are volunteered in total?

Volunteers:
Average # hours/month:

9. Does your organization have a property to maintain?

Grounds to maintain (ballfields, rinks, etc): _____
A building that is used to deliver programs and host events: _____
Other: _____

10. State property assessed value and property tax expense.

PID or Property Address: _____
Property Assessed Value: \$ _____ Property Tax Expense: \$ _____

PART E: PROJECT DETAILS (Not required for Programming or Operational Support)
All applications will be evaluated based on the information provided in this application.

11. Describe your organization's specific project requiring support.

12. Describe the benefits your project will provide to the Harvey Rural Community.

13. Will you partner with other organizations or businesses on your project? If Yes, please list.	
14. PROJECT EXPENSES: Outline the planned expenditures for your project.	
15. PROJECT REVENUE: List any other funding sources to which you have applied for this project, including amount, funding agency, and status of those applications.	
COMMUNITY INVESTMENT REQUESTED FROM THE HARVEY RURAL COMMUNITY (Select one)	REQUESTED
<input type="checkbox"/> Operational support	\$
<input type="checkbox"/> Project costs	\$

DECLARATION

The information provided on this application form and accompanying documentation is accurate to the best of my knowledge. I hereby give the Harvey Rural Community authority to verify any and all information pertaining to this application.

Application prepared by:

Signature *Print Name* *Date*

Board authorization (if applicable):

Signature *Print Name* *Date*

Harvey Rural Community approval:

Application approved for: \$ _____

To the following organization: _____

Application denied

CAO *Date*