



WCSG LEGACY FUND GRANT APPLICATION



Contact with the SDCF office is highly recommended prior to submitting a grant application along with reviewing the WCSG Legacy Fund Grant Guidelines.

Legacy Fund Granting takes once per year with application deadline being: **February 28th**

APPLICANT

Name of Host Community or School Division: _____

Name of CAO or Superintendent: _____ Signature: _____

Address: _____ Postal Code: _____

Telephone: _____ Email: _____

Charitable Registration Number: _____ or Ability to Provide Tax Receipt _____

The Project

Name of Organization: _____

Contact person: _____ Title: _____

Address: _____ Postal Code: _____

Telephone: _____ Email: _____

Year Established: _____ Website: _____

Number of Board Members: _____ Number of Staff (Full & Part Time): _____

ATTACHMENTS TO BE INCLUDED

- List of officers of the Governing Board and/or Volunteer Directors
- Copy of the most current audited or reviewed financial statements
- Income and expense budget for the current fiscal year
- Detailed Project Budget including quotations for equipment purchases
- Statement from the Provincial Sport Organization (PSO), stating the volunteer organization is "in good standing" with the PSO along with a confirmation of the date and location of the event/ program (if applicable)

GRANT REQUEST

AMOUNT REQUESTED \$



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Project Information

Project Description Summary:

Project Start Date: _____ **Completion Date:** _____

1. Describe the project, including the purpose of the project and goals.

2. Describe the involvement of your organization, members of the community and other organizations in the development and implementation of the project.

3. Site evidence of the human or community need for the project specifically stating its significances to the organization's community and service area.



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4. Have you approached other sources for support? Yes No

Name	Amount	Confirmed	Unknown

5. What financial resources will be available for this project's continuation?

6. If this project is successful, how does the organization propose to recognize the SDCF?

Organization Information

1. What is the purpose of the organization?

2. What services are provided? – include target population, geographic area served,# of people served.

3. Have there been any major changes to the organization's operational funding over the past 3-5 years, if so please explain?



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This application must be signed by two of the organization's Board Members.
(Chair/President, Vice-chair/Vice-president or Treasurer - By signing this application the applicant agrees to the expectations of grant recipients and gives SDCF permission to publishing grant info upon approval of the grant. Grant applications, which are not approved, will remain confidential.)

Signature

Title

Signature

Title

Please send the application and supporting documents to:

Selkirk & District Community Foundation
200 Eaton Ave., Selkirk, MB R1A 0W6

For more information: Bev Clegg, Executive Director

Phone: (204) 785-9755 E-mail: selkirkfoundation@shaw.ca Website: www.sdcf.ca

Any personal information requested on this application will only be used to assist with the assessment of your grant application.