

Application for Community Small Grant

Group Name/Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Description which should include:

What exactly is the project or activity you intend to undertake?

What need(s) or priority is being addressed? (OCCHN Priorities listed on Call for Applicants)

How does this project address the 12 Determinants of Health?

How will you measure the impact of your project?

Number of recipients expected to benefit from project\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who are your confirmed community partners for 50% of the project? What funds are they providing in cash or in kind? (Partners are to be determined prior to the submission of the application)

Where do we find out more information about your organization?

**Application must not exceed one typed page (size 11 fonts)**

**Applications must have project budget attached**

**Maximum Grant Amount $2,000.000**

***Project proposals will be accepted until 12 noon, September 30, 2016 or until all funds have been allocated.***

***In addition to an electronic emailed copy, a printed copy must be mailed to:***

***Our Cowichan***

***PO Box 20106,***

***Duncan BC***

***V9L-5H1***

***For more information please contact Cindy Lise Our Cowichan Regional Facilitator***

[***cindylisecchn@shaw.ca***](mailto:cindylisecchn@shaw.ca) *or call 250-709-5062*