# Edmonton Immigrant and Refugee Communities Grant Application Form 2024



This Application is for the **Edmonton Immigrant and Refugee Communities Grant.** 

Before applying please take the time to review the Edmonton Immigrant and Refugee Communities Grant Program Guide and the Grant webpage to confirm your organization and project/program is eligible.

The following Required Documents must be uploaded to the Application Form before you submit. Failing to provide these will result in your application being denied:

- A copy of your organizations operational budget from the previous year (To verify that your overall operational expenses were not above \$200,000) The operational budget must be signed by 2 board members
- A copy of your annual AGM meeting minutes or board meeting minutes that show us that you spoke about your financials and that the board voted on those financials, approving them.
- Completed Project/Program Budget Form (<u>Budget Template</u>)
- Most recent audited year-end financial statements, signed by 2 Board members

#### OR

 Most recent internally generated financial statements (those that are not presented either as a notice to reader, a review or an audit) signed by 2 Board members and must include a bank reconciliation and bank statement as at the fiscal year-end

Application Deadline (Community Impact, Seed, Space): Now Open

Application Deadline (Community special projects will be open until March 21, 2024)

\* Indicates required question

| 1. | Email * |  |  |  |
|----|---------|--|--|--|
|    |         |  |  |  |
|    |         |  |  |  |
|    |         |  |  |  |

## Freedom of Information and Protection of Privacy (FOIP) Statement

Personal information is being collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and will be used by the City of Edmonton, Community Grants Office to determine eligibility for this grant and for the management and administration of this program. The information in this application may be shared with other internal City of Edmonton business areas for reporting analysis. If you have any questions about the collection or use of your personal or organizational information, please email grants@edmonton.ca.

## **Applicant/ Organization Information**

| 2. | Name of Organization/Group (Legal name | if applicable) * |
|----|--|------------------|
| 3. | Organization Mailing Address *         |                  |
| 4. | Organization Postal Code *             |                  |
| 5. | Organization Email Address *           |                  |
| 6. | Organization Contact Number *          |                  |

| 7.  | Main Contact Name *  | _                             |
|-----|--|-------------------------------|
| 8.  | Main Contact Role *  |                               |
| 9.  | Main Contact Email *                                       |                               |
| 0   | rganizational Governance                                   | _                             |
| 10. | Do you require a Fiscal Agent? *                           |                               |
|     | Mark only one oval.  |                               |
|     | Yes - and I need you to connect me                         | Skip to question 29           |
|     | Yes - I have arranged my own and will Skip to question 16  | provide the information below |
|     | No, we are incorporated and our inform Skip to question 11 | nation will be attached below |
|     |  |                               |

No - We are incorporated

| 11. | Under which government Act is your Organization incorporated? *  |
|-----|--|
|     | Mark only one oval.  |
|     | Alberta Society  |
|     | Non-Profit Private company   |
|     | Non-Profit Public company  |
|     | Extra provincial non-profit corporation  |
|     | Other:   |
| 12. | Organization Date of Incorporation (You must be incorporated for at least a year to be eligible for this grant)  |
|     | Example: 7 January 2019  |
| 13. | What is the Mandate/Mission Statement of your organization? *  |
|     |  |
|     |  |
| 14. | If you are awarded a grant you Organization may need to sign a funding letter or * agreement. Please provide the name of your <b>first</b> signing authority with their email address. |
|     |  |

| 15.  | If you are awarded a grant you Organization may need to sign a funding letter or agreement. Please provide the name of your <b>second</b> signing authority with their email address. | 7 |
|------|---|---|
| Skip | to question 29  |   |
| Ye   | es, I have arranged my own fiscal agent   |   |
| 16.  | Fiscal agent name - Legal name of Organization *  |   |
| 17.  | Fiscal Agent - Organization mailing address *   |   |
| 18.  | Fiscal agent - Organization Postal Code *   |   |
| 19.  | Fiscal agent - Organization Email address *   |   |
| 20.  | Fiscal Agent - Organization contact number *  |   |
| 21.  | Fiscal Agent - Main contact name *  |   |
|      |   |   |

| Fiscal Agent - Main contact role *   |
|--|
| Fiscal agent Main contact email address (If different than the organizations email address)    |
| Under which act is the Fiscal agent incorporated? *  |
| Mark only one oval.  |
| Alberta Society  |
| Non-Profit Private Company   |
| Non-Profit Public Company  |
| Extra Provincial Non-Profit Corporation  |
| Other:   |
| Fiscal Agent - Organizational Date of incorporation (Must be incorporated for at least a year) |
| Example: 7 January 2019  |
| What is the mandate or mission statement of the fiscal agent? *                                |
|  |
|  |
|  |
|  |

| 27.  | If you are awarded a grant you <u>Fiscal Agent</u> may need to sign a funding letter or agreement. Please provide the name of your <b>first</b> signing authority (Of your fiscal agent) with their email address.  | * |
|------|---|---|
| 28.  | If you are awarded a grant you <u>Fiscal Agent</u> may need to sign a funding letter or agreement. Please provide the name of your <b>second</b> signing authority (Of your fiscal agent) with their email address.   | * |
| Skij | p to question 29  |   |
| Pr   | roject/Program Overview   |   |
| 29.  | Which grant stream are you applying for? *  |   |
|      | Mark only one oval.   |   |
|      | Seed (Up to \$4,000) Skip to question 30  |   |
|      | Community Impact (Up to \$7,000) Skip to question 41  |   |
|      | Special Projects (Up to \$20,000) - Open until March 21, 2023  Skip to question 52  |   |
|      | Space (\$ based on rental calculations) Skip to question 64   |   |
| Se   | eed Grants  |   |
| Gr   | rant Amount   |   |
| Up   | o to \$4,000  |   |
| Int  | tended Use  |   |
| an   | upport community groups or organizations to identify community needs and test innovative nd/or experimental approaches to address these need(s). The funds will support ojects/programs that are short-term/one-off and focused on activating a community for a |   |

positive impact.

| _ | Grant request as per your attached budget? (Please use a number) *   |
|---|--|
| ٧ | Which priority do you hope to address? *   |
| 7 | Fick all that apply.   |
|   | Support Immigrant and refugee community groups and organizations in creating a delivering projects that address the needs and opportunities identified within their communities. |
|   | Strengthen the feeling of belonging, foster connections, and support communities   |
| c | Increase ethnocultural communities participation in political, social, economic and cultural life in Edmonton  |
| C | Support the growth and development of community groups to best serve their communities.  |
| F | Please indicate if this a *  |
| ٨ | Mark only one oval.  |
| ( | New program  |
| ( | An expansion   |
| ŀ | f this is an expansion, describe how and why you are expanding the program?  |
|   |  |

| Describe the community need and that your project/program will address and te us why it is important for your community? |
|--|
| How did you determine community need? *  |
|  |

| 39.  | Who will benefit from this Project/Program *                                 |
|------|--|
|      |  |
|      |  |
|      |  |
| 40.  | When will the project happen? *  |
|      |  |
|      |  |
|      |  |
| Skip | to question 70   |
| Co   | mmunity Impact   |
| Gra  | nt Amount  |
| Bet  | ween \$4,001 - \$7,000   |
| Inte | ended Use  |
| То   | scale up successful projects/programs that address a broader community need. |
| 41.  | Name of the program *  |
| 42.  | Grant request as per your attached budget? (Please use a number) *           |
|      |  |

| Which priority do you hope to address? *  |
|---|
| Tick all that apply.  |
| Support Immigrant and refugee community groups and organizations in creating and delivering projects that address the needs and opportunities identified within their communities.                  |
| ☐ Strengthen the feeling of belonging, foster connections, and support communities. ☐ Increase ethnocultural communities participation in political, social, economic and cultural life in Edmonton |
| Support the growth and development of community groups to best serve their communities.   |
| Please indicate if this a *   |
| Mark only one oval.   |
| New program   |
| An expansion  |
| If this is an expansion, describe how and why you are expanding the program?  |
|   |
| Describe your project, what do you want to do with your community? *  |
|   |
|   |

| US V | vhy it is important for your community?                 |
|------|---|
|      |   |
|      |   |
|      |   |
| Hov  | v did you determine community need? *                   |
|      |   |
|      |   |
|      |   |
| Des  | cribe the projects/programs activities and timelines. * |
|      |   |
|      |   |
|      |   |
| Who  | o will benefit from this Project/Program *              |
|      |   |
|      |   |
|      |   |

| 51.        | When will the project happen? *  |  |  |
|------------|--|--|--|
|            |  |  |  |
|            |  |  |  |
|            |  |  |  |
| Skip       | to question 70   |  |  |
| Spe        | ecial Projects   |  |  |
| Gra        | nt Amount  |  |  |
| The<br>Mai | ween \$7,001 - \$20,000  For are two intake periods for this grant. First intake deadline is the third Thursday of rch. If there are remaining funds the second intake will be the third Thursday of tember.                           |  |  |
| Inte       | ended Use  |  |  |
| barı       | support projects/programs that attempt to address/respond to or challenge systemic level riers to inclusion. These projects/programs are larger in scale and scope and aim to ress more complex settlement and integration challenges. |  |  |
| 52.        | Name of the program *  |  |  |
| 53.        | Grant request as per your attached budget? (Please use a number) *   |  |  |
|            |  |  |  |

| 54. | which priority do you nope to address? *   |
|-----|--|
|     | Tick all that apply.   |
|     | Support Immigrant and refugee community groups and organizations in creating and delivering projects that address the needs and opportunities identified within their communities. |
|     | Strengthen the feeling of belonging, foster connections, and support communities.  |
|     | Increase ethnocultural communities participation in political, social, economic and cultural life in Edmonton  |
|     | Support the growth and development of community groups to best serve their communities.  |
| 55. | Please indicate if this a *  |
|     | Mark only one oval.  |
|     | New program  |
|     | An expansion   |
|     |  |
| 56. | If this is an expansion, describe how and why you are expanding the program?   |
|     |  |
|     |  |
|     |  |
|     |  |
|     |  |

| 57. | Describe your <u>project</u> , what do you want to do with your community? *  Explain how the priority you selected above match your program goals                           |
|-----|--|
|     |  |
| 58. | Tell us how the principles of the EIRC program will be included in your Program? * The principles are: Interculturalism, Empowerment, Community Input, Relationship Building |
|     |  |
| 59. | Describe the <u>community need</u> and that your project/program will address and tell *us why it is important for your community?   |
|     |  |
| 60. | How did you determine community need? *  |
|     |  |
|     |  |

| 61.  | Describe the projects/programs activities and timelines. * |
|------|--|
|      |  |
|      |  |
|      |  |
|      |  |
|      |  |
| 52.  | Who will benefit from this Draiget/Dragram *               |
| 02.  | Who will benefit from this Project/Program *               |
|      |  |
|      |  |
|      |  |
|      |  |
|      |  |
| 53.  | When will the project happen? *                            |
| 03.  |  |
|      |  |
|      |  |
|      |  |
|      |  |
| Skit | o to question 70   |

16/20

## Space Grant

#### **Grant Amount**

If renting a not-for-profit or public facility (such as a community league, school or cultural hall), groups are eligible for an 80% subsidy up to a maximum of \$6,000. When renting commercial space, groups are eligible for a 60% subsidy up to a maximum of \$5,000 / year. The space subsidy is open throughout the calendar year until the funding runs out.

#### **Intended Use**

The EIRC Space Subsidy Grant assists immigrant and refugee communities with the cost of renting space for their programs and/or organization based on a **calendar year of January to December.** 

#### **Final Reporting**

A final report must be submitted no later than February 1, of the year following funding.

| 64. | What is the address of the rental space? *                            |
|-----|---|
| 65. | What type of space are you renting? *  Mark only one oval.            |
|     | Commercial?  Not for profit?  |
| 66. | If you are renting a not for Profit space, who is the not for profit? |

| 67. | What will your organization be using the space for? *   |
|-----|---|
|     | Programming space, conference space, office space, etc  |
|     |   |
|     |   |
|     |   |
| 68. | Is this space for an ongoing monthly rental/lease? or is this a one time rental or * space?                   |
|     | Please provide details including costs and dates. (You will need to upload the rental/lease agreement below.) |
|     |   |
|     |   |
| At  | tachment for Space Applications   |
| 69. | Please upload your rental/lease agreement here: *   |
|     | Files submitted:  |
| Or  | ganizational Documentation Uploads  |

- 70. Please upload your
  - -Operational Budget for the Last Fiscal Year
  - -Copy of your meeting minutes where the Financial were approved
  - -Most recent Audited Financial Statements singed by two (2) board members OR
  - -Most recently generated financial statements (Those that are not presented as either a notice to reader, a review or an audit)signed by 2 board members and must also include a bank statement and bank reconciliation aligned with the year end.

Files submitted:

## **Budget template Uploads**

71. Please upload your budget template here: \*

**Budget template** 

Files submitted:

## **Declaration**

The applicant declares, to the best of their knowledge and belief, the information provided is truthful and accurate, and that the application is made on behalf of the application-named organization.

Please click Submit.

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