



District of Elkford
744 Fording Drive PO Box 340 Elkford, B.C. V0B 1H0
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FINANCIAL ASSISTANCE GRANT APPLICATION FORM

IDENTIFICATION:

Form with fields: Name of Society or Organization, Society #, Contact Person, Home Phone #, Business Phone #, Mailing Address

ORGANIZATION INFORMATION:

Form with fields: Organization Goals, Objectives, and Activities, Number of Years in Operation, Service Provided to the Community, % of Elkford Residents

GRANT REQUEST Attach separately, additional documentation if pertinent to the District to considering the request.

Form with fields: Type of Grant - check one only (Capital Project Grant, Local Special Events, Out of Town Event), Amount of Financial Grant Requested, Benefit to community resulting from Grant, Degree of Other Community Support or sponsorship

FINANCIAL INFORMATION CHECKLIST

To be submitted with this request, the following must provide details of expenditures and revenues, including other grants and donations received and/or applied for.

- Current Budget, Proposed Budget, Financial Statements (audited preferred)

NOTE: The release of funds is contingent upon the District receiving the requested budgets and an acceptable financial statement for the previous year.

Date

Signature

Submit completed original application to: District of Elkford, Attention: Director of Financial Services

DUE DATE: February 28, 2023

**DISTRICT OF ELKFORD
2023 GRANT REQUEST APPLICATION FORM**

DEADLINE FOR SUBMISSIONS: February 28, 2023

Please complete the following:
(Put N/A where applicable and attach additional pages if more room is required)

(a) SOCIETY EXECUTIVE:

<u>Title</u>	<u>Name</u>	<u>Phone No:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional Contact Person: _____

(b) OTHER FUNDING:

List all other agencies/governmental bodies from which a grant has been requested for the fiscal year ending in 2023:

Agency	Address	Amount Requested	Status
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(c) DETAILED GRANT INFORMATION:

Describe how you plan to use the District grant. (i.e. project or program):

THE INFORMATION INCLUDED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

President/Chairperson