

Renaissance Sackville is an organization sponsored by the Town of Sackville. Its focus is the economic and cultural development of Sackville and it offers modest seed funding and limited administrative support to new community initiatives whose purpose supports the Renaissance vision: "Sackville will be a vibrant, economically and environmentally responsible, aesthetically pleasing, caring, friendly and gracious community."

PROJECT GRANT (Check 1 only): PROJECT GRANT (Complete I CAPACITY-BUILDING GRANT*	•	,4,5)
PART ONE:		
Name of Organization applying:		
Address:		
Telephone #:	Fax #:	E-mail:
Primary Contact Name:		
Title:		
Telephone #:	Fax #:	E-mail:
Project Coordinator Name (if diffe	erent from primary co	ontact):
Title:		
Telephone #:	Fax #:	E-mail:
Total Amount Requested:		
Brief Description of Project or Actionly):	tivity for which fundin	g is requested (half page

^{*} **Capacity-building:** setting up a new Non-Profit or community group; incorporation costs; conference or workshop attendance; training; strategic planning etc

PART TWO:

Organizational Information

Mission Statement:
How many paid staff do you have? (briefly outline title and role):
How many volunteer staff do you have? (briefly outline title and role):
Members of Board of Directors:
Have you had previous grants from Renaissance Sackville? Yes No
Year: Amount:
How will you acknowledge and recognize Renaissance's grant, if received:
If you received any funding from the Town of Sackville in the current year, how much did you receive and what was it used for?
Please also attach: ☐ Most recent financial statements ☐ Current fiscal year's budget of income and expenses ☐ Brochures or materials, if relevant

PART THREE:

Project Impact

The goal of Renaissance Sackville is to improve the quality of life in our Community. Please describe how your project will improve the quality of life of Sackville residents:
Is your project innovative? Why?
What public support is there for your project?
How many people do you anticipate your project will affect?
How many volunteers will be involved?
To what extent will your project leverage additional funds or initiate additional support from other groups or organizations:
How will you share successes with the community?
Is this a one-time or recurring project?
What is your project timeline?

PART FOUR:

Budget & Evaluation

Provide a detailed breakdown of your project's or activity's budget:

Project/Activity Expenditures (please itemize)	Amount (\$)	, c 23.3gc.	
Total Expenditures:			
Project Revenue	Approved	Pending	Declined
(include all sources of funding)			
Federal Funding			
Provincial Funding			
Municipal Funding			
Other Grants			
Sponsorships			
Admission Fees			
Fundraising			
Merchandise Sales			
In-Kind			
Other:			

Funding Sources:

Other than for this project, please indicate if you have been declined funding in the past 3 years and by whom:

Project/Activity Evaluation*

How, when and by whom, will your project be evaluated:

^{*} Successful applicants must complete a brief evaluation report that will be sent to you if your project is accepted. For help with project planning and evaluation, see: http://nonprofitscan.imaginecanada.ca/files/nonprofitscan/en/misc/projectguide_final.pdf

PART FIVE:

What is the capacity building activity you are applying for	What is the	capacity	/ buildina	activity	vou are	applying	for?
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How will this activity benefit your organization?

What is the benefit to the community of this activity?

How many people in your organization will be involved in this activity?

Do you have a long-term strategy to build on this activity?

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