



Municipality of Trent Lakes

Application for Municipal Grant

Submission Deadline: Second Friday in January (late applications will not be considered)

Name of Organization:

Contact Person's Name:

Address:

Email:

Phone Number:

Area of Interest

Are you able to answer yes to the following?

Is your organization located in the Municipality of Trent Lakes?

Is your organization able to demonstrate a financial need?

Does your organization make a contribution to one of the following?

Health and wellbeing

Arts and culture

Heritage

Environment

Recreation/ Leisure

Economy

Is the requested activity or program open to the community?

Are you able to show a need for the program or service with proof of how those served will benefit as well as the geographic area and population of those served?

Amount of funding requested:

Funding to be used for:

Project

Program

Operating

Organizational goals and objectives related to the grant request:

Briefly describe the proposed event, project, or service that will be funded by this grant. Please ensure that items identified are in keeping with Funding Grant Criteria contained in the Municipal Grant Policy.



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Please explain how the Municipality's approval of grant funding would enable your organization to sustain or provide additional support to the community and how this benefit will be measured?

If applicable, please provide the number of people who benefit from services, programs and/or attend your events?

If your organization is unsuccessful in receiving a Municipal grant, what will the effect on the proposed event, service, or project be?

If you are receiving a grant, how will you recognize the Municipality's contribution?

Conditions of Grant

As a condition of the award of a grant, the applicant agrees to allow the Municipal Treasurer or delegate, to examine any records of the applicant to ascertain that the funds granted by the Municipality to the applicant have been properly expended for the purpose herein described.

I/WE certify that to the best of our knowledge, the information provided in this grant request is accurate and reasonable and is endorsed by the organization we represent.

Name

Name

Title

Title

Date:

Please feel free to attach any additional information which supports the submission.



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Any amounts awarded are determined by Council during the budget approval process. There is no guarantee of funding.

Financial Information (Mandatory)

Organization Name:

Revenue	Previous Year Budget	Previous Year Actual	Current Year Proposed
Grants - Municipality			
Grants – Other (please specify)			
Memberships			
Donations			
User Charges			
Other Revenue (please specify)			
Total Revenue			
Expenditures			
Salaries/Benefits			
Building – Rent/Taxes/Insurance			
Volunteer Insurance			
Light, Heat, Telephone etc...			
Office Equipment & Supplies			
Advertising/Publications			
Travel			
Bank Charges			
Professional Fees			
Other (please specify)			
Total Expenditure			
Bank Balance on Dec. 31			

Specific Project Breakdown (if applicable)

Item	Total Cost	Cash from Other Sources	In-Kind Support	Trent Lakes Grant Request

Total Project Value:

Total Request from Trent Lakes: