

'Schedule A'
Town of Nipawin
Fee for Service Policy
APPLICATION FORM

Deadline for applications: 4:30 p.m. October 31, each year.

General Information:

The contents of this application are considered public information and may be released upon request.

| | | |
|---|---|--|
| Legal Name of Organization: | | |
| Mailing Address: | | Postal Code: |
| Phone: | Fax: | E-mail: |
| Contact Person: | | Position: |
| Registered Society: Yes <input type="checkbox"/> No <input type="checkbox"/> | Society Registration No: | Is your society in Good Standing with the Registrar: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Total Funding Request (in dollars): Year 1 \$ _____ Year 2 \$ _____ Year 3 \$ _____ | Proposal in best characterized as: <input type="checkbox"/> Event <input type="checkbox"/> Program Participants/beneficiaries will primarily be: <input type="checkbox"/> Youth <input type="checkbox"/> Seniors <input type="checkbox"/> Disadvantaged persons <input type="checkbox"/> Other (describe) _____ This proposal's activities can best be described as related to: <input type="checkbox"/> Arts and Culture <input type="checkbox"/> Recreation and Sports <input type="checkbox"/> Environmental, Social and Education | |

Declarations

I hereby certify that the information included with this application is complete, and is true and correct to the best of my knowledge, and that I have been authorized by the Board of Directors or Organization Executive to make this declaration and to submit this application on behalf of the above-named organization.

| | | |
|-----------|----------|------|
| | | |
| Signature | Position | Date |

I hereby declare that if our organization is successful in obtaining Town of Nipawin fee for service funding that we give the Town of Nipawin (or a third party appointed by the Town) the right to review the project or event for which the fee for service funding was obtained to ascertain whether monies received were used for the stated purpose(s) set out in this application. In the event that there is suspicion of mismanagement/fraud relating to funding, the Council of the Town of Nipawin must be notified immediately.

| | | |
|-----------|----------|------|
| | | |
| Signature | Position | Date |

Return to:
Town of Nipawin,
Director of Finance & Administration
P.O. Box 2134
Nipawin SK S0E 1E0

General Fee for Service Contract Information: (attach additional pages as required)

1. Describe the operation and history of your organization:

2. Describe the specific activity to which the Fee for Service funding would be applied:

3. How was the need for your proposal identified and how will the activity meet this need:

4. How will this proposal benefit the community by promoting enhancement of community identity and pride locally, encouragement and expansion of volunteerism, promotion of healthy living, promotion of history, arts, culture, and roots, sustainability for the community (including financial stability), enhancement of quality of life for residents?

5. How will participants or beneficiaries become aware of this event/program?

6. What are the expected outcomes of the proposed activity?

7. List the number of citizens served by your organizations in the past two years and the number expected to be served during the 3 years following receipt of this Fee for Service Contract, if approved. Please provide any other statistics that may be helpful.

8. How will you evaluate your proposed activity at the conclusion of the project or event?

9. Identify any similar services or events offered in the Town and describe how your proposed activity is unique.

10. List any organizations with whom you collaborate or partner in order to provide services.

11. Please indicate how your organization will recognize the Town's contribution to your project or event.

12. Please describe the governance structure of your organization.

13. Please describe the financial controls and administrative management process in your organization.

14. Please describe the organization's financial need for Town funding assistance for this proposal.

15. What are the total annual revenues for your organization?

16. Will this activity be complete within a three year period of receipt of the Town Fee for Service Contract?

17. Will this fee for service funding be used to fund staff training and professional development? If so, please give details.

18. Please describe your organization's membership criteria, detail how many members you have, and indicate what volunteer activities the organization undertakes.

19. Does your organization have paid staff and if so, how many staff in total?

(Where the Town Fee for Service contribution is used towards the payment of salaries and wages, an additional Schedule, addressed to the Director of Finance & Administration, labeled as "PRIVATE and CONFIDENTIAL" is to be submitted together with the grant application, specifying approved actual and budgeted salaries and benefits per staff member. The Town may request copies of employees T4's. This information will be held as confidential, and will not be available for release upon request.)

20. Outline your contingency plan if this funding application is not approved.

21. Please list any assistance your organization has received from the Town in the previous four years.

22. What previous sources of funding have you administered from sources other than the Town?

23. Please describe the marketing and self-financing activities of your organization. Where do the organizations revenues come from and approximately what percentage is derived from each source?

24. What are your organizations overall goals and objectives for the coming three years?

Applicants seeking assistance greater than \$1,000.00 per year must provide:

- a detailed consolidated budget for the entire organization including both revenues/expenditures and a specific budget for the project or event for which assistance is requested;
- where a portion of funds are intended to go towards salaries the applicant is required to provide an itemized breakdown detailing the following:
 - position title
 - wages
 - benefits
 - gross position expenses
- a current financial statement prepared and signed by the appropriate person (i.e.: CPA, CA, CGA, CMA, comptroller, bookkeeper, financial officer, treasurer) business plan or statement of objectives;
- a quarterly financial report to be submitted prior to the release of fee for service funding (for funding in excess of \$5,000.00);
- constitution and bylaws of the organization if such exist.

