

**2017 GRANT APPLICATION
DEADLINE: September 30, 2016**

Please note: A grant in any year is not to be considered a commitment by the County of Perth to continue such assistance in future years. It is not the intent of this grant program to become an annual component of an organizations's operating budget plan.

Grant Information

Amount requested for this 2017 grant: \$ _____	Will funding be requested in future years? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please indicate intended future requests</i> 2018 \$ _____ 2019 \$ _____
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Please indicate how the grant funds will be used:

General Organization Information

Organization Name: _____

Contact Name: _____

Mailing Address: _____

City/Town _____ **Postal Code:** _____

Telephone No.: _____ **Fax No.:** _____

Email: _____ **Website:** _____

Briefly state your organization's missions/goals:

Number of volunteers: _____

Does the organization operate as a not-for-profit? Yes No

Is the organization incorporated? Yes No
If yes, please give the date of incorporation: _____

Does the organization have charitable status? Yes No
If yes, please provide charitable number: _____

Are fees charged for membership or services/activities you provide? Yes No
If yes, please explain: _____

Does anyone besides County of Perth residents belong to your organization, or benefit from your services/activities? Yes No
If yes, please explain: _____

Required Information to be attached to the current application

Organization Structure Information

Attach a list of your organizational structure with this application (*where applicable*)

- Board of Directors, Executive Officers, Staff (*please indicate which staff positions are paid*)

Program Information

Attach supporting information (maximum 4 pages) that helps to illustrate your organization's programs and activities, and how they benefit the community

Financial Information

Attach the following financial information:

- Most recent year-end financial statements (balance sheet and income statement, showing comparison with previous year, audited if available)
- Budget for the year in which the funds are being requested (anticipated revenues and expenses)
- Indicate separately any funding requested or received from other levels of government and other agencies, and the status of each application

Signatures

Name: _____ **Position:** _____

Signature: _____ **Application Date:** _____

Instructions for Submission

Please forward the completed grant application form and all supporting documents (electronic submissions preferred) by September 30, 2016, to:

MAIL:

County of Perth
Finance Division
1 Huron Street
Stratford, ON N5A 5S4

EMAIL:

treasurer@perthcounty.ca

Inquiries and submission regarding this application form may be directed to:

Phone: 519-271-0531 x 210

Fax: 519-271-6265

Email: treasurer@perthcounty.ca

NOTICE OF COLLECTION

Personal information contained on this application form or in background material included with your application is collected pursuant to the *Municipal Act 2001* and *Municipal Freedom of Information and Protection of Privacy Act* and will be used by the County of Perth in reviewing the current grant application and other related administrative purposes for the County of Perth. Questions regarding the collection and use of this information may be directed to the County Clerk, 1 Huron Street, Stratford ON N5A 5S4, or by telephoning 519-271-0531 x 120 during business hours.

* requires a local email client

Please ensure that you include the documents outlined in the section **Required Information to be attached to the current application**.
If you submit via email you will need to send these documents in a separate email to treasurer@perthcounty.ca