

Please complete in full.

Part A Organizational Details

Organization (official name) _____

Mailing address _____

City/Town _____ Province _____ Postal code _____

Name of Chair (if applicable) _____

Project Contact Name _____

Work Phone _____ Alternate Phone _____

Email _____

Alternate Email _____

Is your organization a non-profit society or non-profit cooperative? Yes No

Are you registered with the Nova Scotia Registry of Joint Stocks? Yes No

If yes, provide your Registry of Joint Stocks Registration Number. _____

Are you federally registered? Yes No

If yes, provide your charitable registration number. _____

Has the organization applied to CCTH programs before? Yes No

If so, which programs and when?

Part B Project Details

Project Title _____

Brief Project Description

Total Project Costs _____ Funding Request _____

Start Date _____ End Date _____

Projects must start after December 20, 2021 and cannot extend beyond December 31, 2022.

Location of Activity _____

Is a public event part of your project? (*not required*) Yes No

Must comply with current Government responses to COVID-19 advisement: novascotia.ca/coronavirus

If so, what is the proposed date and location?

Date _____ Location _____

Project Theme: *Select all that apply.*

Supporting Nova Scotia families with children living with lower employment income

or: Select all that apply.

Children

Youth Transition to Adulthood

Housing

Mental Health and Addictions

Economic Inclusion (Workforce Attachment)

Food Security

Transportation

Select the community/population(s) that are the primary focus of your project.

Select a maximum of three (3).

Mi'kmaq

African Nova Scotian

All Nova Scotians

2SLGBTIQ+

Acadian

Diverse Cultural Communities and Racialized Groups

Gaelic

People with Disabilities

Seniors

Women

Youth

Part C Project Budget

Eligible project activities must begin between December 20, 2021 and December 31, 2022.

All applicants must complete the budget form below.

- For Tier 2 project projects, it is recommended that a separate, detailed budget be submitted.

Project Budget - Expenses

Item	Total cost of item	Notes
Administration		
Rentals and Purchases		
Travel		
Resources/ Supplies		
Professional Fees		
Honouraria		
Marketing		
Other		
Totals		

Project Budget - Revenues

Source	Cash (\$)	In-kind (\$)	Notes	Confirmed? Yes or No
Applicant				<input type="checkbox"/> <input type="checkbox"/>
Municipal Government				<input type="checkbox"/> <input type="checkbox"/>
Provincial Government				<input type="checkbox"/> <input type="checkbox"/>
Federal Government				<input type="checkbox"/> <input type="checkbox"/>
Donations				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
Other				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
Amount Requested				
Totals				

Part D Project Details

See Building Vibrant Community (BVC) Guidelines for more information.

Complete on a separate sheet and submit. In providing answers to the following questions demonstrate if/how your project aligns with the promising practices identified in the BVC Guidelines.

1. Briefly describe your organization including when established, mandate or primary purpose of the organization, and nature of regular activities.
2. Describe the project briefly but comprehensively and include the name(s) and role(s) of project staff.
3. Clearly explain how the project focuses on one or more of the seven themes (Children, Youth Transition to adulthood, Housing, Mental Health and Addictions, Economic Inclusion - Workforce Attachment, Food Security, and/or Transportation). **If your project addresses poverty related challenges created or worsened by COVID-19, describe how.**
4. Explain who will benefit from the project and how the project plans to reach this population. (In your answer include whether the project will engage or involve marginalized community members and/or if the project will be available, or held, in a marginalized community.)
5. How many people do you hope will participate in or benefit from your project? Explain how participants will be engaged.
6. Identify any lasting impacts that are intended from the project.
7. Clearly explain how partnerships and/or volunteers will be involved in the project. Consider how your proposed project/program might help participants access, or become aware of, other resources they need. For example, through the intentional building of referral networks, creation of partnerships that bundle services together or integration of services so that one point of entry for multiple services is created.
*For Tier 2 projects, the staff names and letters of commitment for collaborating organizations must be included.
8. Provide a work plan for the project, including project activities, anticipated outcomes, and a timeline indicating key dates. Dates may be tentative.

Declaration

As a representative of an organization, consortium or group (including ad-hoc group):

- I have carefully read the application guidelines and eligibility criteria for this program, and confirm that the organization, group (including ad-hoc) or consortium I represent meets the eligibility criteria.
- I am aware that all overdue final reports, where applicable, for previously funded applications must be submitted and approved before any additional requests or applications for funding can be considered.
- I understand that my current application may not be eligible if any of my final reports have not been submitted and approved.
- I will act as the representative of the organization, consortium or group and will keep all participants informed of the application content and any funding decision.
- I agree to implement an evaluation with the support of the Province's evaluation team and participate in any evaluation activities undertaken by the Province associated with the Building Vibrant Communities Grants.

I accept all declaration statements above that are applicable to me as an individual application or as a representative of an organization, consortium or group. I understand that not accepting these statements as true will affect eligibility for this funding application.

Signature _____ Position _____ Date _____

As the chair of the applying organization, I declare that I am aware of this project, and all related reporting and fiduciary responsibilities.

Chair Signature _____ Date _____

Send completed, signed applications and supporting information to, by January 26, 2022:

Building Vibrant Communities Program
Communities, Culture, Tourism and Heritage
1741 Brunswick Street, 3rd Floor
PO Box 456
Halifax, Nova Scotia B3J 3X8

Email: communitiesns@novascotia.ca

Fax: 902-424-0710

For further information call 902-424-5793