

Organization Contact Information	
Applicant: (as it appears in Registry of Joint Stocks)	
Registry of Joint Stocks ID#:	
Primary Project Contact:	
Primary Contact Email:	Phone:
Secondary Project Contact:	
Secondary Contact Email:	Phone:
Organization Mailing Address:	
Civic Address of Facility: (if different than the mailing address)	

Project Information

Project Title:	
Provide a brief description of the proposed project: (1-2 sentences)	
Project Start Date:	Estimated Project End Date: No later than March 1, 2025

Project Details: (Please answer the following)

Describe how the facility addresses the needs and increases participation for culturally diverse, underrepresented, and marginalized groups.

Describe how this project will increase or enhance use of the facility.

What is the anticipated lifespan of this capital investment?

What precautions can be or will be made to strengthen this capital investment against climate change impact?

Equity, Diversity, Inclusion, and Accessibility (EDIA)

Communities, Culture, Tourism and Heritage (CCTH) is committed to ensuring our programs and services are equitable, accessible, and inclusive. Understanding the demographics of our clients and people we serve will help us determine whether our programs, funding allocations, and processes are inclusive of Nova Scotia's diverse communities.

- If you are an organization, please identify who your organization serves. If you serve everyone, please select "General population".		
- If you are applying as an individual, please self- identify (select all that apply).		
<input type="checkbox"/> General population		
<input type="checkbox"/> African Nova Scotian	<input type="checkbox"/> People living with disabilities	<input type="checkbox"/> 2SLGBTQIA+
<input type="checkbox"/> Persons of African Descent	<input type="checkbox"/> Low income	<input type="checkbox"/> Gender Diverse
<input type="checkbox"/> Mi'kmaq / Indigenous	<input type="checkbox"/> Children in care/transitioning out of care	<input type="checkbox"/> Men / Boys
<input type="checkbox"/> Racialized groups / communities	<input type="checkbox"/> Underhoused / homeless	<input type="checkbox"/> Women / Girls
<input type="checkbox"/> Immigrants/newcomers /refugees	<input type="checkbox"/> Youth (under 19 years)	
<input type="checkbox"/> Acadian / Francophone	<input type="checkbox"/> Seniors (65+ years)	
<input type="checkbox"/> Gaelic / Gaels		
<input type="checkbox"/> If not identified above, please specify:		

As part of CCTH's commitment to EDIA, we are interested to know if your organization's leadership is reflective of the communities you serve.

Does your organization's leadership (Board, committee, staff, volunteers, etc.) reflect the communities you serve (language, gender, lived experience or cultural identities, etc).

Yes Somewhat No Unsure n/a

BUDGET				
Expenses (Project Cost)			Quote/estimate	
	Description	Amount	Attached	
Labour			Y	N
Material			Y	N
Equipment			Y	N
Other			Y	N
Other			Y	N
Other			Y	N
Total Expenses		A		
Revenues and Contribution			Confirmed	
	Description	Amount		
Cash on Hand			Y	N
Bank Loans (for this project)			Y	N
In-kind Labour			Y	N
In-kind <i>Material</i>			Y	N
In-kind Equipment			Y	N
Federal Government Source			Y	N
Municipal Government Source			Y	N
Other Provincial Government Sources			Y	N
Other			Y	N
Total Revenues and Contribution		B		
Amount requested from Dept. of Communities, Culture, Tourism & Heritage, maximum 1/3 of total project cost up to \$8,000 (A minus B)		\$		

Statement by the Applicant

I certify, I have signing authority for the organization and to the best of my knowledge that the information provided in this application represents the proposed budget and activities for this project and that the organization understands the Community Recreation Capital Grant Program Guidelines and endorses the project I represent.

Signature				Date	
Name (<i>print</i>)		Position			
Mailing Address					
Postal Code		E-mail		Phone	

APPLICATION CHECKLIST (Please confirm the following)

- Is your application signed and dated?
- Did you provide answers to the project questions?
- Have you provided proof of ownership? e.g. copy of deed or lease
- Have you provided relevant quotes and estimates?
- If applicable, have you provided copies of permits and reports?

Confirm Funders - Date to be confirmed Funder 1

Funder 2

For Office Use Only

Date:

Amount Requested

Project Total Cost

Amount Recommended

Regional Manager Signature

Notes:

Submitting your application Regional Offices

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Cape Breton Region – serving Cape Breton Island

Larry Maxwell, Regional Manager

Office: 902-578-4813 **Email:** CapeBretonRegion@novascotia.ca

Courier/Mail: 850 Grand Lake Road, Suite 15, Sydney, NS B1P 5T9

Central Region – serving Halifax Regional Municipality (HRM)

Andrea Redmond, Regional Manager

Office: 902-578-4813 **Email:** CentralRegion@novascotia.ca

Courier: Homburg Bld, 3rd Floor, 1741 Brunswick Street Mail:

PO Box 456, Halifax, NS B3J 2R5

Fundy Region – serving Cumberland, Colchester Counties, and Municipality of East Hants

Courtney Nicholson-Patriquin, Regional Manager

Office: 902-338-0659 **Email:** FundyRegion@novascotia.ca

Courier/Mail: 80 Walker Street, Suite 1, Truro, NS B2N 4A7

Highland Region – serving Guysborough, Antigonish and Pictou Counties

Rae Gunn, Regional Manager

Office: 902-338-0659 **Email:** HighlandRegion@novascotia.ca

Courier/Mail: 149 Church Street, Suite 4, Antigonish, NS B2G 2E2

South Shore – serving Yarmouth, Shelburne, Queens, Lunenburg Counties and District of Argyle

Anna Haanstra, Regional Manager

Office: 902-698-9407 **Email:** SouthShoreRegion@novascotia.ca

Courier/Mail: 312 Green Street, Lunenburg, NS B0J 2C0

Valley Region – serving Municipalities of West Hants, Clare, Annapolis, Kings and Digby Counties

Anna Sherwood, Regional Manager

Office: 902-698-9407 **Email:** ValleyRegion@novascotia.ca

Courier/Mail: 10 Webster St., Suite 200, Kentville, NS B4N 1H7