



Please complete in full. Only complete applications are will be reviewed.

Part A: Organizational Details

Applying Organization (official name):	
NS Joint Registration No. (if applicable):	
Project Contact:	
Project Contact Position:	Date Started with Organization:
Name of Chair (if applicable):	
Mailing Address: (all correspondence and payment will be sent here)	
Contact Work Phone:	Alternate Contact Phone:
Contact Email:	Organization URL:
Has the organization applied to CCH programs before? If so, which programs and when?	
Do you have a vendor number? (not required)	





Part B: Project Details

Project Title: _			
Total Project Costs:	\$	Funding Request:	\$
Start Date:		End Date:	
Location of Activity:			
Is a public eve	nt part of your	<pre>project? (not required)</pre>	
If so, what is tl	ne proposed da	ate and location?	
Program Goal	s: (please sele	ect all that apply.)	
support increase margina commur increase	diversity and education, a lized groups ities; and capacity with lized groups.	hin organizations that r	ition of traditionally he diversity of Nova Scotia
Signature		Position	Date
Chair, Board of D OR Chief	virectors	Date	





Part C: Project Budget

All applicants are required to complete the budget form below.

For larger projects, a separate detailed budget may be included.

Project Budget - Expenses			
Item	Total cost of item	Notes	
Administration			
Facilities and			
equipment			
(rentals)			
Travel			
Resources/			
Supplies			
Professional			
fees			
Honouraria			
Marketing			
Other			
Totals			





Project Budget - Revenues					
Source	Cash (\$)	In-kind (\$)	Notes	Confirmed? Yes or No	
applicant					
Municipal Government					
Provincial Government					
Federal Government					
Donations					
Ticket sales					
other					
Amount Requested					
Totals					





Part D: Project Details

(complete on separate pages and submit)

Answer the following six questions and submit with your application. Number each answer to correspond to the question number. Please print single sided and do not submit application materials stapled or bound in binders, folders or plastic sleeves.

Materials such as photographs, promotional pieces and letters of support may be included with your application.

- 1. Provide a brief description of your organization including when established, mandate or purpose of the organization, and nature of regular activities. Include how this project helps to fulfill your organization's mandate.
- 2. Describe the project briefly but comprehensively. Include the names of project personnel and collaborating organizations (if applicable). Attach resumes/biographies of principal participants, letters of commitment, or information from other partners as appendices. If support or participation is tentative, include the names of the people/organization who will be approached to assist with the project.
- 3. Clearly define how the project will support one or more key areas targeted by the program. (see page 1)
- 4. Provide a work plan, including a timeline. This should include key milestones in project planning and delivery. Dates can be tentative.
- 5. Describe how the success of the project will be measured and include applicable evaluation documents.
- 6. What relationships will your organization develop or strengthen within your community by carrying out this activity? (Name specific organizations if applicable)





7. Application Checklist

Have you discussed your project with the program officer? (recommended)
Have you completed applications sections A – D?
Do your project expenditures and revenues balance?
Is your application signed?
Will your project contact be easily reached by program staff? (if an organization representative with knowledge of the program cannot be reached, this may delay funding if successful)
Have you answered all six (6) questions of Part D?

The Department of Communities, Culture & Heritage is subject to the *Freedom of Information and Protection of Privacy Act*. This means that certain information provided for the purpose of this application may be accessible to anyone under the *Act*. When appropriate, you will be informed of such a request and provided an opportunity to present your views on the possible disclosure of information that may affect your interests

Title: Diversity and Community Capacity Fund Application

Contact: Communities, Culture and Heritage

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