**Deadline to submit Application: 5:00 p.m. Monday, June 12, 2023**

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|  **1.** Contact Information |
| Legal Name of Not-for-Profit Organization: |
|  Government of Newfoundland and Labrador Vendor Number (if applicable): |
| Mailing Address: |
| Town/City: |
| Postal Code: | Telephone: |
| Email: | Website: |

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|  **2.** Name and Title of Main Contact Person: |
| Name: | Title: | Email: |
| Telephone: |

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|  **3.** Organization Information |
| Are you a Not-for-Profit Organization? |
| * Yes. If applicable, (please specify Incorporation Number):
 | * No (Please note, only not-for-profit organizations are eligible.)
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| Did your organization receive funding from the Grants to Youth Organizations program in 2022-23? | * Yes
 | * No
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**Tell us about your proposed project with as much detail as possible.**

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|  **4.** What is the title of the project for which you are seeking funding? |
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| **5.** Please describe your proposed project: |
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|  **6.** How will your project encourage youth skills, knowledge and/or leadership? |
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|  **7.** How will your project support youth to contribute to their community, region and/or province? |
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|  **8.** How will your project enhance, promote or support partnerships, collaboration or inclusion?  Please list any partners you have for your project.  |
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|  **9.** How will your project fill a gap in service? For example, will it fill a gap in current services in the  community, or supplement existing services? |
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|  **10.** How will your project provide opportunities for intergenerational activities that help build  relationships between generations? |
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|  **11.** What are the proposed outcomes of your project, and how will you measure them? (Organizations  are required to report on outcomes at the conclusion of the project by March 31, 2024. Stating  outcomes here will help with this reporting and evaluation). |
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| **12.** Approximately how many youth will the project serve? |
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| **13.** What geographical area will your project serve? |
| * One community
* Several communities
* A Region
* The Province
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| **14.** What is the anticipated start date for your project? |  / / Year Month Day |
| **15.** What is the anticipated completion date? Project must be completed by March 31, 2024. |  / / Year Month Day |
| **16**. Are there other factors of your project you would like the selection committee to consider? Such as, alignment with the strategic objectives of the Government of Newfoundland and Labrador including serving youth who are traditionally marginalized; educating youth on the risks and harms of sexual exploitation and gender-based violence; and/or focusing on physical activity and mental health? |
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| **17.** Total Estimated Cost of Project (Note: should equal the total of sections 19 and 20 below): |
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| **18.** Amount being requested through this application: |
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| **19.** Budget: Please outline how funding from Grants to Youth Organizations would be used to support this project? |
| Payroll specific to this project \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Materials and Supplies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Other (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **20.** Please list all other sources of funding related to this project, if applicable: |
| **Source of Funding** | **Amount** |
| Applicant Contribution |  |
| Federal Government |  |
| Provincial Government (other than GTYO) |  |
| Municipal Government |  |
| Private Sector |  |
| Fundraising Activities |  |
| Donations |  |
| Other |  |
| **Total of the above** |  |

**Terms and Conditions**

In the event that your funding application is successful, you will be required to provide banking information in order to permit electronic payments.

All approved grant applications would be subject to completion of contractual agreements between the Applicant and the Department of Children, Seniors and Social Development (the Department) to confirm full agreement between both parties.

Department funding may be used only for the purposes specified in this application. Once the Department has agreed to grant financial assistance, no major change can be made to the project without the Department’s approval (in each case, the Department shall determine what constitutes a major change).

The Department reserves the right to determine the extent and type of information required to support payment of the grant. The Department may require an audit be undertaken to verify the purposes for which Government funds have been utilized. You hereby agree to fully participate in any audits requested by the Department.

Funds not used for the purposes outlined in this grant application must be returned to the Department.

The Department requires final reports to be submitted for all funded projects. The report shall be of a format acceptable to the Department and shall be required to be received by the Department by the end of the Government fiscal year in which the project has been funded (March 31, 2024).

The organization bears full responsibility for its debts. The Department will not consider any request for assistance in settling debts. The organization must agree to comply with all provincial, territorial and federal legislation. If any part of this funding is used to pay salaries or honoraria, federal and provincial laws concerning salaries and source deductions must be applied and are the full responsibility of the applicant.

The applicant agrees to respect and apply the spirit and provisions of existing human rights legislation.

Whenever appropriate, public acknowledgement of funding by the Department is expected. Any financial contribution must be explicitly acknowledged and must be mentioned in publications funded by grants related to this application. A standard statement of acknowledgement is available upon request.

By signing this application, (the applicant) authorizes the Department to disclose any information received in this application within the Department or Government or to outside entities for the following purposes: to reach a decision on this application, to administer and monitor the implementation of the project, or to evaluate the results of the project after completion. This disclosure of any information received in this application may also be used to reach a decision on any other application of the applicant for funding under any other departmental program.

**Privacy Notice:**

In the event of an access to information request regarding the present funding application or any relevant information about the organization in the Department's possession, the information provided to the Department will be entirely disclosed, with the exception of personal information and certain confidential business information. Information will be treated in accordance with the Access to Information and Protection of Privacy Act, 2015.

Where any funding is approved, the amount of funding, the purpose for which the funds were granted and the name of the organization receiving the funds are considered public information.

Personal information in this application is being collected under the authority of section 61(c) of the Access to Information and Protection of Privacy Act, 2015, for the purpose of administering the Grants to Youth Organizations program. This information may be disclosed to other Government Departments/Agencies of Newfoundland and Labrador for the purpose of reviewing and monitoring applications, conducting policy analysis and seeking other potential funding sources. Any questions or comments can be directed to The Department of Children, Seniors and Social Development, by emailing CSSDGrantPrograms@gov.nl.ca or by calling 1-709-729-4349.

**Declaration**

By signing below, I declare that:

The information in this application is accurate and complete.

I / We have the appropriate signing authority to legally bind the agency / organization.

I/We have read and agree to the Terms and Conditions and Privacy Notice.

The application is made on behalf of the organization named, with its full knowledge and consent.

If financial assistance is provided, the organization shall agree to an assessment of the funded initiative pursuant to the requirements as stated herein and in accompanying correspondence.

The Recipient agrees to keep records, books of account and supporting documents in accordance with accepted accounting procedures and practices pertaining to the financial management of funds received from the Minister. The Organization shall retain and make available such records for audit and inspection by the Minister, by any person authorized on the Minister's behalf, or the Auditor General for a period of six (6) years after the end of the Agreement.

**FOR OFFICE USE ONLY**

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| **Applicant name:** | **Title:** (Must have signing authority) |
| **Signature:** | **Date:** |

**Please submit application by e-mail to:** **CSSDGrantPrograms@gov.nl.ca**