



Community Grant Guidelines & Application Form

Due April 1st – 12pm
September 30th – 12pm

The Town of Kindersley
P.O. Box 1269, 106 5th Avenue East
Kindersley, SK S0L 1S0
PH: (306) 463-2675 Fax: (306) 463-4577
Email: ea@kindersley.ca

Purpose:

Annually, Kindersley Town Council contributes \$15,000 to local organizations through a semi-annual grant to a maximum of \$750. This grant is to facilitate projects that develop, expand, and improve important programs and services for the residents of Kindersley and surrounding area. Funding will be awarded during two distribution periods, April 1st and September 30th (in the case of a holiday or weekend, the next business day), and is subject to annual budget approval by Town Council.

Projects Shall:

1. Be conducted within the Town of Kindersley, and resulting goods or services must remain within the municipal boundaries upon completion.
2. Benefit or have a positive impact on a key sector or demographic within Kindersley, or the community at large.

Eligible Applicants:

Non-profit or community-based group/organization currently active within the Town of Kindersley municipal boundary. *Organizations providing sport, recreation, and cultural services within the Town of Kindersley should apply to the Kindersley Community Initiative Program (KCIP) before applying to this grant. KCIP is funded by Saskatchewan Lotteries.*

Criteria:

1. The project must operate on a non-profit basis.
2. The application must be legible and feature all fields completed.
3. Priority will be given to projects/programs that provide new goods or services to the community.
4. Eligible projects should not duplicate existing projects or services within the community.
5. The grant is not transferable and must not be used for any purpose other than the approved project.
6. Organizations shall maintain proper financial records for the project and a final financial statement should be submitted to the Kindersley Town Office no later than 365 days after their application deadline (ex. April 1st or September 30th). Failure to provide the report will result in the organization becoming ineligible for future funding.
7. Allocated funds that remain unused, must be repaid to the Town of Kindersley by January 1st of the next calendar year. Failure to do so will render the applicant ineligible for future funding.

8. Applicants shall be responsible for obtaining all required licenses, permits, insurances, permissions and other authorizations, including for the use any photographs, copyright materials, property, or other rights belonging to third parties that are used for the project. The Town of Kindersley shall not be held liable for any failure to acquire necessary permissions, or for any components or actions of organization.
9. Projects must reflect the best general interest of the community of Kindersley and should not promote any ideas or opinions that could be deemed as discriminatory or offensive in nature.
10. Equipment purchased through the grant will become property of the Town of Kindersley upon the dissolution of the group. This is to ensure the intent of the program is carried forward in providing community members opportunities to participate in community activities; especially the key sector or demographic identified in the original application.
11. Projects must be completed within one year (365 days) of the application date.
12. Organizations may only submit one application per year (January 1 – December 31), based on the Town's annual budget period.
13. Grant money will be issued by the Town of Kindersley.
14. Successful applicants must publicly acknowledge the Town of Kindersley for funding received, and should display the support logo provided in any publications or display advertising used.
15. Receipts are to be attached and included with the follow-up package.

Ineligible Expenses:

- Property taxes or insurance
- Alcoholic beverages
- Donations
- Out of town activities and travel
- Subsidization of wages for fulltime employees

Application Process:

1. Submit an application form and all related material to the Town of Kindersley Administration Office (106 5th Ave E, Box 1269 Kindersley, SK S0L 1S0) by 12pm, April 1 or September 30 (in the case of a holiday or weekend, the next business day).
 - a. Failure to complete all application fields will deem it ineligible.
2. Applications are reviewed by a designated member of administration and the Community Grant Committee to ensure requests meet the grant Purpose, Criteria and Eligible Applicant Status. It will also be confirmed that the proposed project expenses do not fall within the above-listed ineligible expenses.
3. Recommendations forwarded to Town Council for approval.
4. Letters and funds released to successful applicants following formal Council approval.
5. Follow-up reports are to be completed and submitted to the Town of Kindersley within 365 days of application and after completing the proposed project.

For additional information, contact:
Nadine Anderson, Executive Assistant
(306) 463-2675 ea@kindersley.ca

COMMUNITY GRANT Application

Grant Number:



Organization Name:	Main Contact Name:
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Mailing Address:

BOX No.	Street No.	Street	Postal Code
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Phone #:	Fax #:	Email:
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Name of Project:

Project Description - Outline what the project is, where it will take place, include any partnerships and why it is needed: (Attach additional information if necessary)

Project Start Date:	Number of people to benefit from the project:
Project End Date:	

Will this funding support the development of a new local initiative? Yes No

Have you received funding from the Community Grant before?	Grant amount requested: \$ _____
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Community Impact - Identify the impact this project will directly have on Kindersley residents and what the benefit will be: (Attach additional info if necessary)

How will you acknowledge the Town of Kindersley for grant funds received?

I, the undersigned, assert that the information provided is true and accurate to the best of my knowledge and is in compliance with the terms and conditions of the Town of Kindersley Community Grant.

Name of Applicant: _____ Date: _____

Signature of Applicant: _____

Received by: _____ Date: _____

For Office Use Only	
Date Application Received: _____	Application Completed in Full? Y / N
Grant Number: _____	Amount Requested: _\$ _____
Resolution Number: _____	Date Approved: _____
Approved: _\$ _____	Cheque Requisition: _____
Date Follow-up completed: _____	Eligible for Future Funding? Y / N
Mayor Signature: _____	

Town of Kindersley Community Grant Budget Summary



Income	Amount Proposed
Cash Donations	\$
Program Fees (Registration, Admission)	\$
In kind contributions (please list)	\$
	\$
	\$
Other Grants (please list)	\$
1.	\$
2.	\$
Other Sources (please list)	\$
1.	\$
2.	\$
Total In-Kind Contribution	\$
Total Income (without Town of Kindersley funding assistance)	\$

Expenditures: (Identify in-kind expenditures with *)	Amount Proposed
Wages, Honorariums	\$
Program Support/Material Cost	\$
Facilities / Studio / Office Costs	\$
Travel Costs	\$
Advertising and Promotion	\$
Other direct related expenditures (please list):	\$
	\$
	\$
	\$
	\$
Total Expenditures	\$
Projected Surplus / (deficit) without Town of Kindersley funding assistance	\$
REQUESTED GRANT AMOUNT	\$

OTHER FUNDING SOURCES		
Name of Organizations	Amount Requested	Amount Received
1.	\$	\$
2.	\$	\$

*Upon follow up, copies of receipts must be submitted and calculated as Follow Up Actual's on this form. Variations between Amount Proposed and Follow Up Actual should be explained in the follow up report. The Town of Kindersley should be advised of any major changes in the budget prior to expenditure. This financial statement must show the entire eligible project expenses incurred, not just the amount granted by the Town of Kindersley Community Grant.