**PEI Seniors’ Secretariat Grant Program**

**2024-2025 Grant Application Form**

Please review the application prior to submission to ensure all sections of the application are complete. Incomplete applications will not be considered.

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| **Section 1: About Your Organization (Applicant)** |
| 1. **Name of Organization**
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| 1. **Name and Contact Information of Executive Director or President of Organization**
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| 1. **Name and Contact Information of Contact Person for Project**

**(if different than 1B)**  |  |
| 1. **All Applicants must have a registered charity number or a provincial incorporation number. If not, they must partner with another organization that is a registered charity or has a provincial incorporation number.**

**Is your organization a non-profit?**  Yes (registered charity number, if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No**Is your organization incorporated?**  Yes (incorporation number): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ No **(if “No” for both, complete part 1E below on partnering organization)** |
| 1. **For groups not eligible to enter into a service agreement (not a registered charity, not incorporated):**
 | **Name of partnering organization:**  |
| **Registered Charity Number or Provincial** **Incorporation Number:**  |
| **Full name and contact information of contact with partnering organization:** |
| **Letter of Support from Partnering Organization attached (this is required):*** Yes
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| **Section 2: Project Overview**  |
| 1. **Name of Project**
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| 1. **Project Start Date**
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| 1. **Project End Date**
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| 1. **Community(s) Where the Project Will Take Place**
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| 1. **Total Project Cost**

This total includes all other sources of funding (e.g. cash and in-kind contributions)A project budget must be completed and attached with the application. The template can be found in Section 6). |  |
| 1. **Total Amount Requested from the PEI Seniors Secretariat Grant** (up to $5000)
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| **Section 3: Project Details**  |
| 1. **Project Summary**

Provide a brief overview of the project, and what you plan to accomplish. |
| 1. **Alignment to Priority Areas**

Describe how this project meets one or more of the PEI Seniors’ Secretariat priority areas for funding. |
| 1. **Are seniors involved in the planning and/or delivery of this program?**

  Yes  No  **If yes, describe how they will be engaged:**  |
| 1. **Will other individuals, community groups and/or organizations be engaged in the planning and/or delivery of this project?**

  Yes  No  **If yes, describe who they are and how they will be engaged:**  |

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| **Section 4: Project Workplan Template**  |
| **Activity** | **Start Date** | **End Date** | **Outputs and/or Outcomes** |
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| **Section 5: Measuring Success and Lasting Impacts**  |
| 1. **How will you know if this project has been a success? How will you measure and/or evaluate the project and its success?**
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| 1. **Will this project continue after the Seniors Secretariat funding has ended?**

 Yes  No**Explain:** |

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| **Section 6: Budget Template** |
| Note: a maximum of $5000 per project will be awarded.Eligible expenses: salaries and benefits (relating to project), honoraria, professional fees, facility rental and utilities, office equipment, materials and supplies, publicity and promotion, in province travel, organizational audit, and evaluation. Non eligible expenses: capital expenses (i.e. funding used to buy, maintain, or improve fixed assets, such as buildings, vehicles, land, or equipment), infrastructure, and out of province travel.  |
| **Item**  | **Amount Requested****(Secretariat)**  | **Funding from Other Sources (Cash)**  | **Funding from Other Sources (In Kind)** | **Total Cost**  |
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| **Total** |  |  |  |  |

**Please explain below where funding from other sources is coming from:**