



Grant Application Form 2021 PDF version

Instructions

To submit manually:

1. **Download this form and print.**
2. Complete all required information manually.
3. Scan and email to the BVCF OR mail your completed copy. Include all required documents.
4. Keep a copy for your records.

Notes

Registered Charitable Partner (If applicable)

Enter the identification information for your registered charitable partner. Include a copy of the partnership agreement.

See Guidelines for partnering with a registered charity and Non-charity and Registered Charity Partnership Agreement

Name of project and description

Describe the activity or work that will be done and where it will take place. Explain who will carry out the activity or work.

Section 1. Identification

Date:

Name of Organization:

Mailing Address:

Contact Person:

Contact Phone Number:

Contact Email Address:

BC Society Act Reg #:

Federal Charitable # (*if applicable*):

Registered Charitable Partner (*if applicable*):

Name:

Federal Charity Reg #:

Mailing Address:

Phone Number:

Partner's Relationship to your Organization:

Section 2. Project Information

Name of project:

Description of project:

Start Date:

End Date:

BVCF field of interest (click to check applicable)

- community
- cultural
- fine arts
- education
- social and family
- sports and recreation
- youth
- health

Who will the project benefit?

Why is the project needed?

Who will monitor/evaluate the project?

Specify how BVCF support will be acknowledged:

Describe your organization and membership:



Section 3. Finance

Funding requested from the BVCF: \$

Specify the project cost item(s) that BVCF funding will support:

PROJECT COST BREAKDOWN (add rows as required)	
ITEM	COST \$
TOTAL PROJECT COST	\$

PROJECT FUNDING SOURCES (add rows as required)	
SOURCE	AMOUNT \$
TOTAL PROJECT FUNDING	\$

Additional Items to Include with Application:

- Most recent financial statements including a balance sheet and income and expense statement.
- Agreement with registered charitable partner if applicable
- Supplier quotes if available

We certify that this application for funds has approval from the Board of Directors.

Name of Director:

Signature of Director: