2024 Community Partners Grant Application

Part 1: Organization Information Organization Name: Address: Website: Organization Role: **Contact Person:** E-mail: **Contact Phone** Organization Role: Alternate Contact: Alt. E-mail: Alternate Phone Is your organization, project or event a charitable, not-for- profit, or volunteer-based group or organization? No 🗆 Yes 🗌 Charitable number (if registered): **Part 2: Grant Request** Funds requested: Brief description of the project for which you are applying for funds.

Timeframe of Project:
Part 3: Detailed Project Information
Give details of the normal activities of your group or organization, including your connection to the Town of Renfrew.
2. Which grant category does your event, program or initiative fall under?
 Fee Waiver/Facility Use One-Time Capital Project
One-Time Capital Project Organizational Support (Operating Grant)
Organizational Support (Operating Grant) Programming/Special Event
 Sponsorship
 Describe in detail the project, event, or initiative for which you are applying for funding. Include information regarding expected total costs, number of participants and the target audience.

4. Has funding been requested from sources other than the Town of Renfrew? If yes, please indicate the amount and source.
5. How will any funding be used? Please note: funds cannot be used for deficits, debt, endowment funds or for religious or political purposes or to achieve an operating surplus that can donated to a separate group.
Please attach:
 Organizational Budget/Event/Initiative Budget Financial Statements List of Board/Committee members Any supporting documentation about your initiative or organization
Applicant Signature:
Date:

2023 Community Partners Grant Final Report

Organization:
Contact Information:
Project:
Funding Received:
Describe your initiative and did it meet its intended goals?
How were the funds spent?
What did you learn?
Triat dia you louin.
Share any feedback you may have.
Supporting Documentation:
Final budget
Other, please specify:
Contact Name:
Signature: Date:
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