



APPLICATION FOR 2009 CDSS FUNDING

PART 1 ABOUT YOUR ORGANIZATION/GROUP

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|---|--------------------------------------|
| Organization Name: | |
| Organization Address: | |
| Contact Name: | Contact Phone Number: |
| Incorporation Number: | Incorporation Date: |
| Charitable Donation Number: | Charitable Organization Name: |
| Executive Director (If Applicable) | |
| Funding Requested: \$ | Amount Approved: \$ |

MISSION/MANDATE OF APPLICANT ORGANIZATION:

GOALS OF APPLICANT ORGANIZATION:

PROGRAMS AND SERVICES PROVIDED BY THE APPLICANT ORGANIZATION:

BOARD OF DIRECTORS:

| Name | Position | Day time Phone # | E-mail Address |
|------|----------|------------------|----------------|
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PART 11 INFORMATION ABOUT THE PROJECT TO BE FUNDED

Complete a Part II for EACH major project to be funded.

NAME OF THE PROGRAM/PROJECT/SERVICE/INITIATIVE:

PURPOSE OF THE PROGRAM:

TARGET POPULATION: *(What group of people will this program serve? In what area?)*

COMMUNITY NEED: *(What information supports your belief that there is a need for this program?)*

COMMUNITY PARTICIPATION: *(What resources, strengths or assets already exist that you can build on? What partnerships, linkages or new directions [that you can build on] are in your community? How will volunteers be involved in this program? What opportunity will there be for clients to participate in the planning and delivery of this program?)*

OBJECTIVES: *(What are the specific objectives of the program that relate to the funding that you are requesting this year?)*

HOW WILL IT OPERATE: *(Give a description of how the program will operate. How many staff will be involved? What qualifications do you require? Are there entry requirements to the program? If so, what are they? Fees? Location? Hours?)*

ACCOUNTABILITY: *(Please provide a complete logic model in the format of the attached example. Objectives and outcomes in the logic model MUST relate to the mandate and objectives of CDSS and of the applicant organization. Please contact the FCSS Director for assistance in completing your logic model.)*

FUNDING

OTHER FUNDERS: *(Indicate any other funders for this program. Will you be fundraising for part of the operating expenses, and if so, how much? Operating expenses include both administration and program costs).*

BUDGET: *(Provide a budget specific to the program/project/service, initiative for which you are requesting funding, and indicate very clearly how much funding you are requesting. Please use attached budget form as a guide to layout and format.)*

CDSS requires all funded programs to sign a funding agreement.

Please review your 2008 agreement.

New applicants can view the funding agreement at the CDSS offices.