

## 2010 MINI-GRANT PROGRAM

The Mini-Grant Program provides \$500 grants to eligible organizations for projects that address the Foundation's granting priorities. This program provides a time-sensitive, streamlined and responsive process for smaller projects. This grant is not suitable for projects that have a budget exceeding \$2000.

### **GRANTING PRIORITIES**

Mini-Grants support projects that build prosperity by:

- Fostering sustainable and collaborative approaches to reducing poverty, or,
- Assisting with the development and implementation of tools and resources that would contribute to an organization's success

### **ELIGIBILITY CRITERIA**

In order to be eligible for a grant, an organization must:

- Be registered as a charity with Canada Revenue Agency (CRA) – note that organizations operating under the auspices of a municipal government (i.e. some libraries, schools, museums, galleries, committees of council) are eligible to apply through the municipality
- Provide local or regional services in Niagara

### **APPLICATION DEADLINES**

All applications must be received by the Foundation by noon on the application deadline.

<b>Application Deadline</b>	<b>Reviewed by Foundation in</b>	<b>Notification of Foundation Decision by</b>
January 15	February	February 28
March 15	March	April 30
May 17	June	June 30
August 16	September	September 30
October 15	November	November 30

## **MINI-GRANT ASSESSMENT CRITERIA**

All proposals will be evaluated on the following criteria:

- Does the project foster sustainable and collaborative approaches to reducing poverty?
- Does the project assist with the development and implementation of tools and resources that would contribute to the applicant's success?
- Is the community or organization strengthened through the project?
- Is there an identified project need?
- Were appropriate methods used to identify the need?
- Does the applicant have the capability to undertake the project?
- Does the project demonstrate an innovative or creative approach to address the need?
- How appropriate is the project evaluation?
- If applicable, is the project sustainable?
- Has the applicant received funding in the past from the foundation?
- Is the project duplicating an existing program or service?

## **WHAT THE NIAGARA COMMUNITY FOUNDATION DOES NOT FUND**

Grants are not available for:

- Core operating costs or capital **building** campaigns [we will fund **equipment** associated with a capital campaign]
- Facility repairs
- Operating or capital deficits
- Activities of religious organizations that primarily serve their membership and/or their direct religious purposes
- Endowment funds
- Retroactive funding for any project expenses incurred prior to the Foundation's decision date
- Annual fundraising drives for operating support
- Individuals
- Political activity as defined by Canada Customs and Revenue Agency's publication on registering a charity
- Programs and services outside of Niagara
- Applicants cannot apply for a concurrent grant unless they are part of a collaborative

## **CONTACT INFORMATION**

Before preparing the Mini-Grant application, organizations must contact the Foundation to determine if the project fits the priorities. Unsolicited applications will be returned to the applicant.

Further information is available by calling JoAnne Krick, Community Initiatives Manager at 905-684-8688, or sending an email to [joanne.krick@niagaracommunityfoundation.org](mailto:joanne.krick@niagaracommunityfoundation.org)

**Once completed, please email the application (pages 3-5 only) to:**  
**[joanne.krick@niagaracommunityfoundation.org](mailto:joanne.krick@niagaracommunityfoundation.org)**

**Or**

**Fax to 905 684-2337**

(Page 2)

**2010 Mini Grant Application Package**

tel: 905-684-8688 • fx: 905-684-2337 • email: [joanne.krick@niagaracommunityfoundation.org](mailto:joanne.krick@niagaracommunityfoundation.org)  
[www.niagaracommunityfoundation.org](http://www.niagaracommunityfoundation.org)

# **Niagara Community Foundation Mini Grant Application Form**

*ALL FIELDS ARE MANDATORY, INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED  
PLEASE TYPE IN THE SPACE PROVIDED*

Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Website \_\_\_\_\_

<i>For office use</i>	
<b>ID</b>	_____
<b>#</b>	_____
<b>Date</b>	_____

Executive Director \_\_\_\_\_

Tel \_\_\_\_\_ E-mail \_\_\_\_\_

Contact / Title \_\_\_\_\_

Tel \_\_\_\_\_ E-mail \_\_\_\_\_

Charitable Registration # \_\_\_\_\_ Year Incorporated \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_ Period this grant covers \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/yr) to \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Executive Director /  CEO or Board Chair (check one)

**Tell us about your group:** What is your mandate? Program and services offered? What geographic areas do you serve?

## **PROJECT DESCRIPTION**

**Tell us about your project:** What do you want to do? Why do you want to do it? Who will benefit? Which other organizations in the community are working with you on this project? How many volunteers will be involved? How long will it take? If appropriate, how will the project be sustained?

What difference do you hope to make and how will you measure the project's impact?

**ORGANIZATION'S FINANCIAL SUMMARY**

Please provide numbers from your organization's financial statements.

<b>Year End Date:</b> _____	<b>Current Year Budget</b>	<b>Previous Year Actuals</b>
Total Revenue	\$	\$
Total Expenses	\$	\$
Excess (or deficit) for year	\$	\$
Reserve Funds - Restricted	-----	\$
Reserve Funds – Unrestricted	-----	\$
Current Accumulated Operating Surplus or (Deficit)	-----	\$

**PROJECT BUDGET**

**Note that the maximum amount available from the Foundation is \$500.  
The application is not suitable for projects exceeding \$2000.  
Total project expenditures must equal total project revenue.**

<b>Project Expenditures</b>	<b>Cost</b>
	\$
	\$
	\$
	\$
	\$
<b>Total Project Expenditures</b> →	\$

**We encourage the use of other revenue sources, including in-kind contributions.**

<b>Project Revenue</b>	<b>Confirmed</b>	<b>Unconfirmed</b>	<b>In-Kind</b>	<b>Total</b>	<b>Contact Name/ Telephone</b>
Niagara Community Foundation		\$			-
					← <b>Total Project Revenue</b>

This application was discussed with JoAnne Krick from the Niagara Community Foundation on \_\_\_\_\_ with the following organization representative\_\_\_\_\_.