

# OFFICIAL APPLICATION FORM



Please answer **ALL** questions on this form. **DO NOT CHANGE** the format of this form. Incomplete or altered applications will not be considered.

## APPLICANT INFORMATION

Name of Organization: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Non-Profit Corporation Number (if applicable): \_\_\_\_\_

## PROJECT OVERVIEW

Project Name: \_\_\_\_\_

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Please provide a detailed description of your program, project or community event and its purpose. If additional space is required, attach additional sheets with the information included:

Amount requested from the Painted Hand Community Development Corporation (PHCDC): \$ \_\_\_\_\_

**(The PHCDC may, at its discretion, approve up to a maximum of \$30,000.00 based on individual applications. Requests for funding in excess of this amount may only be considered by the board of directors of the PHCDC on a special case-by-case basis and subject to availability of resources. Applicants may also be required to make a presentation to the board of directors during their allocation meetings)**

The 2002 Gaming Framework Agreement permits the distribution of funds from the PHCDC in the following ten (10) areas. Please check the appropriate box which best aligns with your organization's proposed project, program or community event:

- |                                                                            |                                                                               |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Economic Development                              | <input type="checkbox"/> Senior and Youth Programs                            |
| <input type="checkbox"/> Social Development                                | <input type="checkbox"/> Cultural Development                                 |
| <input type="checkbox"/> Justice Initiatives                               | <input type="checkbox"/> Health Initiatives                                   |
| <input type="checkbox"/> Educational Development                           | <input type="checkbox"/> Other Charitable Purposes                            |
| <input type="checkbox"/> Recreational Facilities Operation and Development | <input type="checkbox"/> Community Infrastructure Development and Maintenance |

Please describe how your organization's proposed project, program or community event falls within the areas identified above:

Identify your target group (ie. youth, adults, seniors, at-risk youth and families, etc.). Indicate how your proposed program, project or community event will provide services and benefits to this group and to the community.

Are any similar or existing programs and services available to your community in relation to the proposed project, program or community event?

Have you partnered with another community-based organization, First Nation or other legal entity for your program, project or community event?

Yes

No

If yes, please provide the following information:

Partner: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Has funding or other resources been provided or made available to you in relation to your proposed project, program or community event from any other source? If so, please describe in detail the funding or resources provided and from whom they were provided or made available to you.

Have you received funding from the PHCDC in the past?       **Yes**                       **No**

If yes, please provide the program, project or event title, file number and date:

Has your follow-up report been completed and approved by the board of directors?

**Yes**                       **No**

Provide any additional information or comments that you feel would be beneficial in support of your application for funding from the PHCDC.

Please specify the payee information in the event your organization is approved for funding. Cheques cannot be made payable to an individual. Payee: \_\_\_\_\_

How would your organization acknowledge the PHCDC's contribution if approved for funding?

# REVENUE

Please disclose all sources of revenue that have been secured to date, or will likely be secured for your program, project or community event. Please attach copies of any commitment letters or other relevant correspondence or documentation.

Community and/or internal sources	\$ _____	Other Fundraising (canteen, charity auction, etc)	\$ _____
Partnership contribution	\$ _____	SIGA head office	\$ _____
Federal Government	\$ _____	Painted Hand Casino	\$ _____
Provincial Government	\$ _____	Other sponsorships and donations	\$ _____
Municipal Government	\$ _____	Loans or mortgages	\$ _____
Community Initiatives Fund (CIF)	\$ _____	Other sources (please specify): _____	\$ _____
Charitable Gaming Revenue (bingo, raffles, etc)	\$ _____		\$ _____
<b>TOTAL CONFIRMED REVENUE (Line 1)</b>			<b>\$ _____</b>

# EXPENSES

Please disclose all projected expenditures for your program, project or community event. Use additional paper if necessary. **IMPORTANT: Provide a summary of quotes, estimates, including copies of proposed contracts for service, etc.**

Independent Contractor Fees <small>(only to the extent such fees are considered specialized and essential for the proposed project, program or community event – description required)</small>	\$ _____
Honorariums <small>(limited to Elder services only)</small>	\$ _____
Building Materials <small>(provide detailed list with supporting summary of quotes, estimates and expenditures included)</small>	\$ _____
Equipment and supplies associated with proposed project, program or community event *	\$ _____
Facilities Rental associated with the proposed project, program or community event <small>(limited to facilities rental only)</small>	\$ _____
Utilities <small>(limited to portion related to project, program or community event only)</small>	\$ _____
Transportation for program or project participants, where applicable	\$ _____
Other <small>(please specify):</small> _____	\$ _____
<b>TOTAL PROJECTED EXPENSES</b>	<b>Line 2</b> \$ _____
Shortfall Revenue <small>(Line 1 minus Line 2)</small>	<b>Line 3</b> \$ _____
<b>TOTAL AMOUNT REQUESTED (all or part of Line 3)</b>	<b>\$ _____</b>

\*Equipment and supplies - provide detailed list with supporting summary of quotes, estimates and expenditures.

In kind contributions: Please indicate contributions, other than financial, to your project and include approximate value. (Include donation of supplies, professional services).

_____	\$ _____
_____	\$ _____
<b>TOTAL IN-KIND CONTRIBUTIONS</b>	<b>\$ _____</b>

List of attachments \*\* Please include with your application all supporting attachments: i.e., detailed budget, agreements, letters of support, blue prints, estimates, program outlines, etc. \*\*

## TERMS

If the application for funding as provided for herein is approved by the PHCDC board of directors, the Applicant Organization covenants and agrees to undertake the following:

- To maintain all original documentation pertaining to the project, program or community event for which funding has been applied for, including all financial statements, invoices and receipts, and to have these documents made available for inspection or examination upon request by officials on behalf of the PHCDC at any time during normal business hours
- To utilize the funding received only for purposes identified herein and not for any other project, program or activity without the express written consent of the PHCDC board of directors
- To return immediately to the PHCDC, any unused funds not utilized for the purposes of the project, program or community event as identified herein. Further, in the event the final costs associated with the project, program or community event are lower than the costs originally projected, the amount of eligible funding will be adjusted to reflect the lower cost and will be considered an overpayment. Under such circumstances, the Applicant Organization shall within fourteen (14) days following completion of the project, program or community event be required to refund to the PHCDC such funds attributable to the overpayment
- To complete, as and when requested by the PHCDC, a Follow Up Report in a form prescribed by the PHCDC verifying the final costs incurred with respect to delivery of the project, program or community event
- To authorize the PHCDC to publish for use in conjunction with the preparation of its audited financial statements and annual report, reporting to its membership and to the public, the name of your organization, a description of the project, program or community event, and the amount of funding received from the PHCDC. The Applicant Organization hereby acknowledges and agrees that this shall constitute proper and sufficient authority and consent for the release of the said information under applicable federal and provincial privacy legislation including, without restricting the generality of the foregoing, the Personal Information Protection and Electronic Documents Act (Canada).

In the event the application for funding is approved and the Applicant Organization fails to comply with the conditions as referenced above, all funds received by the Applicant Organization pursuant to this application shall immediately become payable by the Applicant Organization to the PHCDC and the PHCDC may, as its option, proceed with the exercise of any or all of the following remedies:

- the PHCDC may cancel or suspend any further payments to the Applicant Organization with respect to the project, program or community event;
- the PHCDC may proceed with the enforcement of any legal proceedings against the Applicant Organization to enforce repayment of all monies advanced to the Applicant Organization and owing to the PHCDC as a result of the Applicant Organization's failure to comply with the terms and conditions as prescribed herein. Further, any Applicant Organization that violates the terms and conditions as prescribed herein or fails to make repayment of any monies owing to the PHCDC shall be ineligible from receiving any further funding from the PHCDC with respect to any other project, program or community event until such time as the total amounts owing have been repaid in full to the PHCDC; and
- the PHCDC may proceed with the exercise of any other rights or remedies it may have in law against the Applicant Organization.

# DECLARATION

On behalf of the Applicant Organization, we hereby represent, warrant and certify the following:

1. That the information contained in this application reflects an accurate description of the estimated costs associated with the related project, program or community event.
2. That the information contained in this application is true and correct and that this application is being executed on behalf of the Applicant Organization by a duly authorized representative on behalf of the Applicant Organization
3. That on behalf of the Applicant Organization, we agree to the terms and conditions as prescribed herein and agree to be bound by such terms and conditions with respect to receipt of all funding received from the PHCDC
4. That we hereby authorize any duly appointed representatives of PHCDC to obtain from and share with such persons or organizations, public or private, any information necessary to complete their assessment of the project, program or community event and the request for funding as outlined herein.

\_\_\_\_\_  
**Name of Authorized Representative  
(on behalf of Applicant Organization)**

\_\_\_\_\_  
**Position**

\_\_\_\_\_  
**Signature of Authorized Representative**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name of Witness**

\_\_\_\_\_  
**Signature of Witness**

\_\_\_\_\_  
**Date**

# SUBMISSION

In order to be considered, all completed applications must be received in the PHCDC office no later than 4:30 p.m. on the following deadline dates:

- January 15th
- April 15th
- July 15th
- October 15th

Should the deadline date fall on a weekend or a holiday, the next business day will be considered as the deadline date. Applications received after the deadline date shall not be considered.

Applicants are required to submit one (1) signed copy of the completed application care of the following address:

**Attention: Laurie Blackbird – General Manager**  
Painted Hand Community Development Corporation  
21 Bradbrooke Avenue North – Suite 2  
Yorkton, Saskatchewan  
S3N 3R1

e-mail to: [laurie@paintedhandcdc.com](mailto:laurie@paintedhandcdc.com)

All postmarked or email applications not received by 4:30 p.m. on the deadline dates specified above shall not be eligible for consideration.

Applications may be submitted to the PHCDC office in the following manner:

- in person
- by electronic submission (email) or
- by mail.

Please keep a signed copy of the completed application for your records. All applications submitted will become the confidential property of the PHCDC upon their submission.