

Grant Application Template

Child Care Capital Grants

Please use this template only to draft your answers offline, so that your work will be saved for your own records, and/or in the event that you encounter a technical issue when using the online grant system.

Do not upload this document as your application. *You must cut-and-paste your answers into the individual spaces provided in the online grant system for your application to be submitted.*

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Step 1: Applicant Contacts

The following section includes questions about the Society.

Society Name

[Information Auto-Generated]

Society Number

[Information Auto-Generated]

Charitable Number (OPTIONAL)

Society Website (OPTIONAL)

Contact:

Please enter this information carefully. We will use it in future correspondence with you.

First Name

Last Name

Title

Address

City

Province

Country

Postal Code

Phone No

Email

Step 2: Applicant Information

The following section includes general questions about your Society. For assistance in filling out this section of the form, please refer to the [Grant Program Guidelines](#).

Application Qualifications:

Briefly outline your Society's history, purpose, vision, mandate, goals and objectives:

Additional Information *(optional)*

Describe Programs and Services provided in the past 5 years:

Do you provide licensed child care programs?

Yes No

If you provide licensed child care programs refer to your Provincial Child Care License(s) and note below the type and number of child care spaces your Society provides along with your current enrolment for each program. For assistance in filling out this section of the form, please refer to the [Grant Program Guidelines](#).

Type of Service	Licensed Capacity	Current Enrolment	No. Children Served Per Month	No. Children on the Waitlist	Monthly Fee per Child
Group Child Care, Under 36 Months					
Group Child					

Care, 30 Months to School Age					
Preschool Care					
School Age Care					

If you operate Preschool Care, describe the schedules that you offer: (optional)

If you operate School Age Care, check off each type of care provided:

- Before & After School Care
- After School Care Onlys
- Professional Days
- Spring Break School Age Care
- Visual Arts
- Summer School Age Care

Comments (optional):

Fiscal Year End:

Proposed Organization Operating Budget for the Child Care Program

Revenues		Proposed Budget	Confirmed? Yes or No		If not confirmed, explain
FEDERAL Government (Specify Department)					
1			<input type="radio"/> Yes	<input type="radio"/> No	
2			<input type="radio"/> Yes	<input type="radio"/> No	
3			<input type="radio"/> Yes	<input type="radio"/> No	
PROVINCIAL Government (Specify Ministry)					
1			<input type="radio"/> Yes	<input type="radio"/> No	
2			<input type="radio"/> Yes	<input type="radio"/> No	
3			<input type="radio"/> Yes	<input type="radio"/> No	
4			<input type="radio"/> Yes	<input type="radio"/> No	
5			<input type="radio"/> Yes	<input type="radio"/> No	
PROVINCE – GAMING			<input type="radio"/> Yes	<input type="radio"/> No	
CITY of RICHMOND			<input type="radio"/> Yes	<input type="radio"/> No	
Other Municipalities			<input type="radio"/> Yes	<input type="radio"/> No	
Foundation (Specify)					

1			<input type="radio"/> Yes	<input type="radio"/> No	
2			<input type="radio"/> Yes	<input type="radio"/> No	
3			<input type="radio"/> Yes	<input type="radio"/> No	
United Way			<input type="radio"/> Yes	<input type="radio"/> No	
Donations			<input type="radio"/> Yes	<input type="radio"/> No	
Fundraising (Net Revenue)			<input type="radio"/> Yes	<input type="radio"/> No	
Earned revenue, Fees			<input type="radio"/> Yes	<input type="radio"/> No	
Other sources (Specify)					
1			<input type="radio"/> Yes	<input type="radio"/> No	
2			<input type="radio"/> Yes	<input type="radio"/> No	
3			<input type="radio"/> Yes	<input type="radio"/> No	

Total Revenue \$

Expenditures		Amount
Salaries and Benefits (All staff)		
Annual Rent or Mortgage		
Insurance		
Operating and Office Expenses (Phone, utilities, supplies, postage, printing, etc.)		
Staff Training and Development		
Program Expenses		
Other Expenses (Specify)		
1		
2		
3		
Total Expenditure		\$0.00
<i>Surplus (Deficit)</i>		<i>\$0.00</i>

Supporting Documents:

Attach a copy or copies of your Society's Provincial Child Care License(s), if applicable. You may also upload your completed "Licensed Capacity: from here (see sample forms on the City's Child Care Grants Site). (optional)

Attach a list of the Board of Directors, Officers, and Executive Directors of the Society, including their addresses and contact information:

Attach Minutes of the Most Recent Annual General Meeting:

Attach Last Year's Financial Statements or Audited Statement including balance sheet for recently completed fiscal year, including the auditors' report signed by external auditors, or see the [Grant Program Guidelines](#). :

If you did not attach the Audit Report or Audit Review Report, please explain:

Step 3: Grant Program

Grant Description:

Amount Requested:

Proposed Project Budget:

Proposal Title:

Purpose of the Grant

- Equipment
- Furnishings
- Playground Improvements
- Other

Describe Purpose:

Describe how these funds will be used to enhance child care service delivery (e.g. improve quality, availability or accessibility)?

Describe who will benefit from the grant, if received:

Do you have any partners who will be assisting with this capital project?

Yes No

If yes, please list the partners and their role.

Proposed Project Budget

Expenses	
Item/Activity	
Total Expenses	

Revenue	
Item/Activity	
Total Revenue	
Surplus/(Deficit)	

Comments (optional): (max. 4000 characters)

Proposed Project Timeline

Start Date:

Completion Date:

Supporting Documents

Attach an itemized budget for how grant funds will be used:

Choose File

Add File

Attach supporting information or quotes for projected costs:

Choose File

Add File

Attach additional sources of funding or contributions that will be used to complete the proposed grant project:

Choose File

Add File

Attach the timeline for completing the project and using the grant funds:

Choose File

Add File

Attach supporting documentation demonstrating need for the grant funds:

Choose File

Add File

Attach letters of support, if applicable: (optional) :

Choose File

Add File

Step 4: Signing Officers

Signatures of two signing officers of the Board of Directors are required to verify the accuracy of the application, to accept the terms and conditions, and to represent the Society's endorsement of this grant application. For assistance in filling out this section of the form, please refer to the [Grant Program Guidelines](#).

Signing Officers

First Name

Last Name

Society Role

First Name

Last Name

Society Role

Attach Completed Signature Form (Download Signature Form)

Choose File

Add File

Terms & Conditions

Definitions

Throughout these Terms and Conditions the following terms will have the following meanings:

- APPLICANT means the organization applying for City of Richmond funding
- CAPITAL means an award for the purposes of funding a capital project
- CITY means City of Richmond
- FUNDS means a dollar amount awarded by the City of Richmond
- RECIPIENT means a successful APPLICANT who receives a dollar amount awarded by the City of Richmond
- FUNDS must be used within one year of receipt by the RECIPIENT.

Any APPLICANT who has been awarded FUNDS previously by the CITY must submit a report documenting use of those FUNDS and describing the benefits received before their current application can be considered.

Any award RECIPIENT must include the City of Richmond logo on any newsletter or publicity generated by the grant recipient.

Any RECIPIENT of CAPITAL FUNDS must obtain any and all required City permits for their capital project.

Any RECIPIENT of CAPITAL FUNDS must submit a photograph of their completed capital project.

Reporting and Acknowledgement of Grant Benefits

- Those receiving a grant must provide an end of grant use report either one year following the receipt of the grant, or, if applying again, at the time that the new application is made.
- Mid-year progress and financial reports may be requested from those seeking annual grants.
- City support is to be acknowledged in all information and publicity materials pertaining to the funded activities. To receive an electronic copy of the City's logo, please contact staff at citygrants@richmond.ca.

Recuperation of Grant

If the grant is not used for the stated purpose, the full amount must be returned to the City.

No Appeal

Due to the high number of applications for limited funding, and since applicants may apply again the following year, there is no appeal of Council's decision.

Do you accept these terms and conditions?

Yes No