



2025

Community Grant Application Form

Deadline: February 28, 2025

The County of Brant is pleased to partner with the Brant Community Foundation for the delivery of its 2025 Community Grants Program.

All County of Brant Community Grant Awards are done so on the basis of providing one-time funding for the applicable budget year. There is no commitment to future years' funding and any contribution to the Community Grants Program is solely at the discretion of the County of Brant Council Annual Budget Process. Any questions regarding the annual budget and/or the County of Brant partnership with the Brant Community Foundation should be addressed to the County of Brant, General Manager of Corporate Services.



Instructions:

This application is a fillable pdf form that must be downloaded using Adobe Reader. The application cannot be saved if it is filled in on the website. Please submit a copy of the grant application, along with all supporting documents, via e-mail to grants@brantcf.ca.

If you are having issues e-mailing your application, contact the Brant Community Foundation – Grants and Communications Coordinator at (519) 756-2499 x202

Do NOT mail / drop off/ courier your grants application.

Late applications **WILL NOT BE ACCEPTED.**

If you have any questions regarding the grant application form, its submission or the status of your community grant application, please contact us at grants@brantcf.ca or 519-756-2499 x202 and ask to speak to the Grants and Communications Coordinator.

After you have submitted a grants application, all applicants will receive a confirmation e-mail that the application has been received. If you have not received this notification within two (2) business days of submitting your application, please contact the Grants and Communications Coordinator at grants@brantcf.ca or (519) 756-2499 x202 to confirm that your application was submitted and received.

For further information on the County of Brant Community Grants Program, please visit our website at <https://www.brant.ca/en/council-and-council-administration/community-grants.aspx>



County of Brant 2025 Community Grant Application Form

Section 1 – General Information

Name of Organization: _____

Name of Applicant: _____

Position of Applicant within the Organization: _____

Contact Information:

Address: _____

Phone Number: _____ E-mail: _____

Type of Grant Applying For: (check all that apply)

- Operating Grant (maximum \$5,000)
(complete Sections 1, 2 and 5 of Application Form)

- Event Grant (maximum \$5,000)
(complete Sections 1, 3 and 5 of Application Form)

- Capital Project Grant (maximum \$10,000)
(complete Sections 1, 4 and 5 of Application Form)



Grant Amount Requested:

Total Amount of Grant Requested: _____

Amount Received in 2024: _____ Amount Received in 2023: _____

Documents to be Included in Grant Application Package:

Check all boxes below to confirm required background documents have been provided:

- Financial Statements for Previous Year (2024)
- Annual Organization Operating Budget for Current Year (2025)
- Event or Capital Project Budget (required for Event or Capital Project Grant, not necessary for Operating Grant)
- Board of Directors or Executive Committee Information (including names, titles and contact information)

About Your Organization:

Check the most applicable box:

- Registered Charity (Charity No. _____)
- Incorporated Non-Profit Organization (Inc. No. _____)
- Other Not-for-Profit Organization (explain): _____

Organization Information:

(comment on the following: programs offered, population served, geographic area served, staff/volunteer based, achievements, other relevant information)



Did you receive any funding from the County of Brant in 2024?

(include any funds granted, whether part of the Community Grants Program or separately, any waiving / reduction of fees and any in-kind services or donations)

If you received a grant from the County in 2024, how was it used? Was this the intended purpose stated in your 2024 grant application? If not, explain the reason for the change in use of funding.

Does your organization carry liability insurance? If so, what is the coverage limit?

Yes, our organization carries liability insurance with a coverage limit of:

No, our organization does not carry liability insurance



Section 2 – Operating Grant Application

About Your Funding Request:

Amount of Operating Grant Requested: \$ _____ (max: \$5,000)

Breakdown of how the grant will be used (should relate to budget amounts):

<u>Amount</u>	<u>Description</u>
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

Have you approached other organizations or levels of government for funding? If yes, provide details below:

<u>Organization</u>	<u>Amount Requested</u>	<u>Amount Awarded</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Are there any other partnerships or collaborations involved in your project / program?



Project / Program Overview:

(describe the project or program, its projected outcomes and how it aligns with your organization's values and/or mission statement)

What Sector(s) will be served by awarding this grant?

(i.e. arts & culture, children & youth, community development, education, environment, food security, health & wellness, heritage, housing, older adults, social services, etc.)

If awarded, how will the funds be used by your organization?

How will these funds directly benefit the community?



How many people will directly benefit from the program and how will participants benefit from the award of this grant?

What percentage of your project / program is expected to have a direct impact on the County of Brant? Is there a specific geographic area of the County that will benefit from this grant?

% County of Brant Impact: _____% Specific Area / Community: _____

% Other Jurisdictions: _____%

Are programs / services funded through this grant open to all County Residents?

- Yes
- No

Do other organizations offer the same or similar services?

- Yes
- No

If yes, what makes your program unique?



How will the funding increase your organization's sustainability? Is this intended as a one-time request or will future grants likely be required?

Will it be possible to run the program with only partial funding?

- Yes
- No

If you receive partial funding, how will you use the money you receive?

Any additional information you would like to provide about this specific request.



Section 3 – Event Grant Application

About Your Funding Request:

Amount of Event Grant Requested: \$ _____ (max: \$5,000)

Event Details:

Name: _____

Date: _____

Location: _____

Is this Event Open to the Public? _____

Will there be a fee for attendance? _____

Is this a Milestone / One-Time Event?

Yes

No

If there are anticipated proceeds from the event, what is their intended purpose?
Is it expected that funds raised from this event will be re-invested / donated to other organizations and/or individuals?



Breakdown of how the grant will be used (should relate to budget amounts – note that a full event budget must be submitted):

<u>Amount</u>	<u>Description</u>
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

Have you approached other organizations or levels of government for funding? If yes, provide details below:

<u>Organization</u>	<u>Amount Requested</u>	<u>Amount Awarded</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Are there any other partnerships or collaborations involved in your event?



Event Overview:

(describe the event, its projected outcomes and how it aligns with your organization's values and/or mission statement)

What Sector(s) will be served by awarding this grant?

(i.e. arts & culture, children & youth, community development, education, environment, food security, health & wellness, heritage, housing, older adults, social services)

How will this event directly benefit the community?

How many participants are expected to benefit from this event?



What percentage of your project / program is expected to have a direct impact on the County of Brant? Is there a specific geographic area of the County that will benefit from this grant?

% County of Brant Impact: _____% Specific Area / Community: _____

% Other Jurisdictions: _____%

Are programs / services funded through this grant open to all County Residents?

- Yes
- No

If you receive partial funding, will it be possible to run the event with only partial funding?

Any additional information you would like to provide about this specific request.



Section 4 – Capital Project Grant Application

About Your Funding Request:

Amount of Capital Project Grant Requested: \$ _____ (max: \$10,000)

Is this request related to a new organization or start-up costs?

- Yes
- No

Breakdown of how the grant will be used (should relate to budget amounts note that a full capital project budget must be submitted):

<u>Amount</u>	<u>Description</u>
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

Have you approached other organizations or levels of government for funding? If yes, provide details below:

<u>Organization</u>	<u>Amount Requested</u>	<u>Amount Awarded</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____



Are there any other partnerships or collaborations involved in your project / program?

Project / Program Overview:

(describe the capital project, its projected outcomes and how it aligns with your organization's values and/or mission statement)

What Sector(s) will be served by awarding this grant?

(i.e. arts & culture, children & youth, community development, education, environment, food security, health & wellness, heritage, housing, older adults, social services)

Why is the Capital Project required and what is the expected life of the asset?

How are you planning for maintenance, repair and/or replacement costs of the asset?

Will it be possible to run the program with only partial funding?

- Yes
- No

If you receive partial funding, how will you use the money you receive?

Any additional information you would like to provide about this specific request.



Section 5 – Attestation

TO BE COMPLETED BY ALL APPLICANTS

Name of Organization: _____

Name of Applicant: _____

Position of Applicant within the Organization: _____

Contact Information:

Address: _____

Phone Number: _____ E-mail: _____

Payment Arrangements:

- The County of Brant already has Electronic Funds Transfer Information for this applicant.
- Please follow up with the designated contact above to arrange for payment following the award.
- Please follow up with the below designated alternate contact for payment:

Contact Information:

Name: _____

Position within the Organization: _____

Address: _____

Phone Number: _____ E-mail: _____



We/I, the undersigned declare that:

- We/I are the Principal Officers of this organization or the individual making the request;
- We/I have been authorized to make this application on behalf of the organization or individual;
- We/I agree that the information provided is true and accurate to the best of our ability.
- We/I acknowledge that submission of a grant application does not guarantee an organization will receive full or partial funding.
- We/I attest that our organization is not in arrears with or involved in any litigation against the County of Brant.

Principal Officer (or individual)		Principal Officer
	Signature	
	Print Name	
	Address	
	Phone Number	
	Date Signed	