



Crossroads Community Investment Fund 2019

Application Form

ORGANIZATION INFORMATION

Organization Name: _____

Contact Person: _____

Date of Application: _____

Address: _____

Telephone: _____

E-mail: _____

Web site: _____

Years of Operation: _____

Number of Members : _____

(if applicable)

Briefly describe what your group does (Mission, Objectives): _____

PROJECT/PROGRAM SUMMARY

Project/Program Title and Location: _____

Start Date: _____ **End Date:** _____

Purpose of funding:

- Capital Building Project
- Capital Equipment Purchase
- One Time Programming Costs

Which categories does your organization fall under:

- Community and Economic Development
- Education
- Youth
- Other, Please state: : _____

Total grant requested (\$):

- \$1,000-\$5,000 \$5,001-\$10,000 \$10,001- \$14,999 \$15,000+

Project Total Cost (\$):

Please provide a detailed summary of your project goals and outcomes. Attach additional information on a separate document.

Why is funding needed for this project/program and how many people in your community would benefit from this project/program?

What impact will this project or program have on the future of the community?

Please identify the possible opportunities for Crossroads volunteerism that may arise from this project/program:

Please list officers and members of your organization's governing board:



PROJECT/PROGRAM SUMMARY CONTINUED...

Please state other funding sources for this project:

<i>Group Name/ Business</i>	<i>Description</i>	<i>Funding Amount (\$)</i>

BUDGET

Please **ATTACH** a detailed budget of the project, including enough information to demonstrate how the budget figures were determined. This includes any quotes obtained. Additional information may be attached on a separate sheet.

Project Tasks <i>(Brief description of task)</i>	Task Responsibility <i>(Who will be responsible for the task)</i>	Time Frame <i>(Approx. date when the task will be performed)</i>	Costs <i>(\$ amount to complete the task)</i>
EXAMPLE			



APPLICANT AGREEMENT

I agree to comply with the following requirements:

Any funds awarded will be used solely for the purpose in which they are awarded, unless written permission is obtained from Crossroads Community Investment Fund for alternative purposes. Any funds not used for the approved purposes will be returned to Crossroads Community Investment Fund. The application and accompanying documents have been reviewed, and we certify that they are accurate and complete.

Crossroads Credit Union and Crossroads Community Investment Fund reserve the right to publicize their part in funded projects.

Name: _____

Signature: _____

Title: _____

Date: _____

APPLICATION INFORMATION

Completed applications, along with supporting documentation, can be submitted by mail, email, fax, or dropped off at your local branch of Crossroads Credit Union.

- ◆ **Email:** CIF@crossroadscu.ca
- ◆ **Mail:** Crossroads Community Investment Fund
c/o Corporate Services Officer
PO Box 2006, Canora SK, S0A 0L0
- ◆ **Fax:** 306-563-6715

Your description of the project/program is crucial as it will tell us what impact your initiative will have on your local community and why funding is needed!

Applications will be accepted from May 6 to August 30, 2019.

If you require additional information or have any questions, please call Leanne at 306-563-2445.

