

Please ensure you use the [free Adobe Reader](#) program to complete this form.



We invite you to contact us before you submit a funding application. By sharing your organization’s internal project plan with us, we can support you in the development of your funding application. Please see [our program webpage](#), or call us at 250-871-7797.

APPLICANT AND PROJECT SUMMARY

Project Title	Date Submitted (dd mmm yyyy)

Application Information	
Organization (Legal Name):	Website:
Street Address or PO Box:	City/Town/Village:
Postal Code:	Incorporation/Society Number:

Primary Organizational Contact	
Name:	Position:
Phone:	Email:

Project Start Date (dd mmm yyyy)	Project End Date (dd mmm yyyy)

ABOUT YOUR PROJECT

Executive Summary

Please provide a brief description of your proposed project.

Rationale for the Project

What are the primary challenges facing economic growth in your community, and how does your strategy address these challenges?

Please confirm this project is led by or focused on rural or First Nations communities with populations under 5,000. Yes No

Please tell us which community or communities will benefit from the formation of this strategy.

Please confirm whether your community has developed or updated an economic development strategy within the last 10 years. Yes No

Project Scope

Please describe your project scope including key components including asset mapping, demographic research and analysis, community and local business engagement, sector analyses, and more in developing the new strategy.

Inclusive Approach

Please describe, providing examples, how your community will take an inclusive approach to developing the strategy within the community along with partners, rights-holders, and key stakeholders.

Focused Action Plan

Please describe how your community will resource and implement the top 3 action items identified through the process of this project (i.e. what is your preliminary implementation plan to create impact from the strategy process?)

PROJECT FUNDING

Funding Request and Disbursement Schedule

Please identify the total funding you are requesting from the Trust and the dates you would prefer to receive funds.

Requested Date (dd mm yyyy)	Project Milestone:	Amount:
	Advance Disbursement (60% is typically provided upon signing the contribution agreement)	\$
	Final Disbursement (40% is typically provided once the Final Report is approved)	\$
Total Funding Requested from Island Coastal Trust:		\$

Funding Source(s):	Type:	Status:	Amount:
Island Coastal Economic Trust	Grant	Pending Decision	\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
		Total Other Funding:	\$
		Total Project Funding:	\$

PROJECT BUDGET

Please provide an update for each completed Work Plan Activity. Copies of invoices greater \$10,000 must be attached when the report is submitted.

Workplan Activity	Responsibility	Budget	Expense Type	Planned Start Date	Planned End Date
The following are the key activities in the project work plan have been approved for funding.					
1.		\$			
2.		\$			
3.		\$			
4.		\$			
5.		\$			
6.		\$			
Contingency if applicable (up to 10%).		\$			
Total Project Budget		\$			

KEY PROJECT OBJECTIVES

Please identify three key objectives.

Each objective should be specific, measurable, attainable, relevant, and time bound.

1.

2.

3.

STRENGTHENING WELLBEING

Our vision is that island and coastal communities are thriving with a resilient economy that strengthens the wellbeing of all people and the environment. To strengthen wellbeing, we invest in projects that create measurable outcomes on a sustained, long-term basis across four bottom lines: Economic Prosperity, Social Empowerment, Climate Resiliency, and Cultural Vitality.

In the following pages, please complete all fields where your project will strengthen wellbeing. Simply complete the fields that are relevant to your project – if a field does not apply, feel free to leave it blank. We assess each project based on the information you provide, and we will ask you to report on the actual outcomes achieved across the following at the end of your project.

PROJECT IMPACT: ECONOMIC PROSPERITY

What partnerships will be formed through this project?

We are particularly interested in community-to-community, Indigenous, and private sector partnerships but also list contractors such as key suppliers, distribution partners, education/training, and consultants.

Organization

Project Relationship

Description

<u>Organization</u>	<u>Project Relationship</u>	<u>Description</u>

How have you engaged with First Nations government(s) through the development of this project?

Please specify the mechanisms and processes you will use to ensure meaningful participation and input throughout the strategy formation process.

PROJECT IMPACT: SOCIAL EMPOWERMENT

How will this project build inclusive economic opportunities for all people?

Please select all applicable and describe each area your project will contribute to.

Stimulate socioeconomic advancement of low-income people and/or underserved communities.
Support the upward mobility of workers.
Employ people from underserved, vulnerable, and equity deserving communities.
Reduce barriers for low-income entrepreneurs, start-ups, and alternative business models.
Leverage capacity in the community to improve the economic livelihood of residents.
Create opportunities for people through upskilling programs that enable career transitions and development.

How will this project build inclusive economic opportunities for all people? Continued.

Remove barriers and improve accessibility for persons with disabilities?

Does your organization’s procurement policy (or equivalent) include social value considerations?

Please provide an estimate of the employment this strategy project will create.

Job Type	Estimated new jobs	Hours of employment per week (average)	Total months worked per year
Direct temporary jobs (e.g. construction or consulting):		hours/week	months

Please list the job titles/roles for the new employment positions that will be created:

PROJECT IMPACT: CLIMATE RESILIENCY

This project will directly strengthen climate resiliency in the community and/or region.

If applicable, please describe any focus on adaptable, low carbon infrastructure, avoiding/reducing emissions, transitioning to low carbon or a more circular economy.

PROJECT IMPACT: CULTURAL VITALITY

This project will directly strengthen cultural vitality in the community and /or region.

If applicable, please describe.

REQUIRED ATTACHMENTS

Please ensure that each of the following are attached with your complete funding application:

Project Plan including most, if not all, of the following:

- Asset mapping
- Demographic research and analysis
- Letter(s) of support from partners, rights-holders, and key stakeholders (incl. local businesses).
- Data analysis
- Sector analyses
- Formal consultation process
- Formation of a focused action plan with a resourcing and implementation plan.

A detailed proposal from a qualified economic development consultant, or internal work plan.

Most recent financial statements (audited if available).

Letter(s) of support from participating partners.

For first-time non-profit or community-owned company applicants – Constitution, Bylaws, and the society's current list of directors.

AUTHORIZATION

I/we certify that the information provided in this Application Form and attached documents are, to the best of my/our knowledge, complete, true, and accurate.
I/we authorize the Island Coastal Economic Trust to make any enquiries of persons, firms, corporations, federal and provincial government agencies/departments and non-profit organizations operating in our organization’s field of activities, to collect and share information with them, as the Trust deems necessary, to reach a decision on this application, to administer and monitor the implementation of the project and to evaluate results after project completion.
I/we agree that the information provided in this application form may be shared with the appropriate regional advisory committee(s), Board of Directors, Trust staff and consultants.
I/we agree that once funding is approved, any change to the project proposal will require prior approval of Island Coastal Economic Trust.
I/we understand that the information provided in this application may be accessible under the Freedom of Information and Protection of Privacy Act (FIPPA).
I/we agree to submit reporting materials as required by the Trust, and where required, financial accounting for evaluation of project expenditures.

By entering my name here electronically, I authorize all the above for this application:

Name of Signing Authority for your Organization:	Title:	Date: (mm dd yyyy)

Thank you – we look forward to collaborating with you to prepare your application for decision.