YOUTH CONTRIBUTION PROGRAM APPLICATION FORM

Submit to your Municipal and Community Affairs Office in your Region

Cabillit to your Marin	erpar arra Communar	ity 7 than 6 office in your region			
Organization Name:					
Description of organization:					
Project Title:					
Contact Name:					
Mailing Address:					
Telephone:	Fax:	Email:			
Brief Description of Program:					
How much funding do you need		How much are you requesting from the			
to run your project?		Youth Contribution Program?*			
Ф.		Φ.			
\$		* Please refer to page 2 for funding limits			
Checklist. Have you (please checklist. Have you (please checklist. Have your proposal? Attached your budget? Reviewed your proposal/budgerson and your sponsoring Kept a copy for your files?	dget with your Regio	onal Municipal and Community Affairs Staff			
Date:	Name (Printed):			
Signature:					

Youth Contribution Program Proposal

Step 1 - DESCRIBE YOUR PROJECT AND WHAT YOU WILL DO

Project Title:							
Please	Please provide an overall summary description of your project:						
	Refer to page 1-2 of the Youth Contribution Fund Guidelines and Criteria for more information.						
	a new project (check one):Yes No u apply for funding last year?Yes No						
1.	Why do you want to do this project?						
2.	What changes do you want to see happen because of your project (goal)? Goal: a statement that describes what you want to see happen as a result of your project. Some examples: Youth developing their skills and confidence, more involvement between Elders and youth, decrease in substance abuse in youth and their families, etc.						
	Your project goal(s) is:						

What kinds of objectives will help you reach your goals? Objective: a statement that describes how your program will achieve your goal. Some examples: to provide business training, to host a youth conference, to teach youth a new skill, to travel to another community, etc.					
Objective 1:					
Objective 2 (if applicable):					
Objective 3 (if applicable):					
(use additional paper if required)					
Provide a detailed description of your project activities below or attach a letter: Activity: What will be done to meet your objectives.					
Evaluation: how will you know if your project is a success - what will you measure to find out, and how will you report on your project: Describe how you will evaluate your project (contact your Regional Municipal and Community Affai Staff Person for assistance).					
Who will coordinate your project? Some examples: Names of volunteers, staff, youth, contractor, elder, instructor, etc.					

When will your	project start	and end	
How often will y month, other)?	ou have your activities	(e.g. 2hrs/day, once a week, twi	
List all locations	s where you will hold y	our program:	
1	2	3	
1	E	6	
How many yout	h will take part in your	project activities?	
How many yout	h will take part in your		
How many yout Groups/Organiz	h will take part in your zations involved - <u>list yo</u>	project activities?	
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*** Please provide a detailed budget of your project on the next page. This information will help process your application faster.



Step 2: Youth Contribution Funding Budget 2005/2006

BUDGET (use extra paper/forms if needed)	Youth Contribution Fund	Other Funding Sources	Explanation: describe all costs, where applicable.
Project Title(s):	•	•	
Materials and Supplies	\$	\$	Comments: please specify the kinds of materials your are buying or will be producing as part of your project
	\$	\$	
	\$	\$	
A. Total Material and Supply Costs:	\$	\$	
Programming and Coordination Costs	\$	\$	Comments: please specify the programming & coordination costs for your project.
	\$	\$	
	\$	\$	
B. Total Programming and Coordination Costs	\$	\$	
Travel	\$	\$	Comments: please specify the travel costs for your project.
	\$	\$	
C. Total Travel Costs	\$	\$	
Other	\$	\$	Comments: please specify any "other" costs for your project.
	\$	\$	
D. Total Other Costs	\$	\$	
E. <u>TOTAL</u> Funding Needed A+B+C+D=E	\$	\$	