



Amateur Sport Project Support Application Form 2006-2007

Project No. _____

Name of Organization: _____

Project Contact Name: _____

Tel:(H) _____ Tel: (W) _____ Fax: _____

Fax: _____ E-mail: _____

Officials:

President: _____

Address: _____

Postal Code: _____

Tel: (H) _____ Tel: (W) _____

Fax: _____ E-mail: _____

Treasurer: _____

Address: _____

Postal Code: _____

Tel: (H) _____ Tel: (W) _____

Fax: _____ E-mail: _____

Each project must outline a project budget, including revenue/expenditures and financial contribution requested. All such information must be provided in detail on the opposite side of this form

If submitting more than one application for support, please prioritize by numbering top right corner of application.

When applying for annual funding, all Provincial Sport Organizations must provide an evaluation for all previous year supported projects. The evaluation should include actual numbers of participants, where and when the project took place and other measurable impact/outcomes, including whether your project met its expectations and if not, why?

Return completed application to:

Ted Lawlor, Sport and Recreation Division
Department of Community and Cultural Affairs
PO Box 2000, Charlottetown, PE CIA 7N8

Tel: (902) 368-4783
Fax: (902) 368-4663

See reverse.....

Project Target Area of Development:

Athlete Coach Officials NCCP Other Explain: _____

Project Title: _____

Project Description: _____

Please list project's **measurable** outcome(s): *Example, "Six officials take upgrading course."* "**Four** coaches take technical course."

Did this project receive funding last year: yes no

Is this project outlined in your two-year plan: yes no

Date(s) of Project: _____ *Location(s): _____

Expected Number of Participants _____

Proposed Budget for Project

Revenue Sources:

Source	Amount
_____	_____
_____	_____
_____	_____
_____	_____
Total Revenue:	_____

Expenditures:

Description	Amount
_____	_____
_____	_____
_____	_____
_____	_____
Total Expenditures:	_____

Amount Requested From Government \$ _____

All projects must be completed by March 31.

** If a series of clinic events are listed, actual locations of each must be identified.*